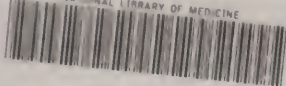




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# ROBB & CO.'S FAMILY PHYSICIAN.

—A WORK ON—

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—DESIGNED TO SHOW—

*How to have Health, which is Equivalent to Time and Money,*

—BY—

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*Homoeopathic.*

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*Allopathic.*

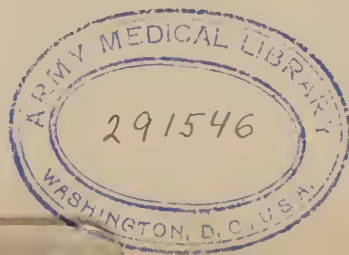
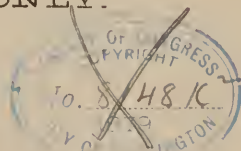
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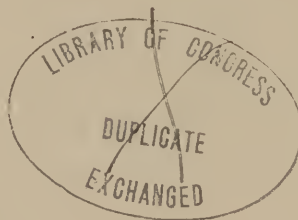
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## TO THE THINKING MASSES,

*And to all classes of our fellow men who love the light of plain truth,*  
rather than the darkness and bigotry that results from one class holding  
all the most vital knowledge pertaining to our bodies, keeping it covered  
by a cloud of words from the dead languages, and thereby aiding in making  
it a cloak under which ignorant men can hide their wickedness, this  
work is most cheerfully dedicated by

THE AUTHORS.

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# TABLE OF REMEDIES.

ABBREVIATION	LATIN.	ENGLISH NAME.
1 Ac	Aconitum napellus	Monk's hood, wolf'-bane
2 Agar	Agaricus muscarius	Bug agaric Amanita
3 Agnus	Agnus castus	Chaste-tree
4 Alum	Alumina	Argilla, Clay, Ox. of Alumen
5 Ambra	Ambra grisea	Ambergris
6 Amm c A	Ammonium carbonicum	Carbonate of Ammonia
7 Amm mur	Ammonium Muriaticum	Muriate of Ammonia
8 Anac	Anacardium	Malacca-bean
9 Ant c	Antimonium crudum	Crude Antimony
10 Apis mell	Apis mellifica	Honey-bee
11 Arg fol	Argentum foliatum	Silver-foil
12 Arg nit	Argentum nitricum	Nitrate of Silver.
13 Arn	Arnica montana	Leopard's bane
14 Ars alb	Arsenicum album	Arsenic
15 Aris virg	Aristolochia virginia	Virginia Snake-root
16 Asa	Asafetida	Asafetida
17 Asarum	Asarum europæum	Common Asarabacca
18 Aurum f	Aurum foliatum	Gold
19 Aur mer	Aurum muriaticum	Muriate of Gold
20 Baryta	Baryta carbonica	Carbonate of Baryta
21 Bell	Belladonna	Deadly Nightshade
22 Borax	Borax	Biborate of Soda
23 Bov	Bovista	Puff-ball
24 Brom	Bromium	Bromine
25 Bry	Bryonia alba	White Bryony
26 Cahin	Cahinca	China-root
27 Cal car	Calcarea carbonica	Carbonate of Lime
28 Cal caus	Calcarea caustica	Caustic Lime
29 Cal phos	Calcarea phosphorica	Phosphate of Lime
30 Calen	Calendula officinalis	Marsh Marigold
31 Cac gran	Cactus grandiflorus	Nightblooming Cereus
32 Camph	Camphora	Camphor
33 Cann	Cannabis sativa	Hemp
34 Canth	Cantharides	Spanish Fly
35 Cap	Capsicum annuum	Cayenne Pepper
36 Carbo a	Carbo animalis	Animal Charcoal
37 Carbo v	Carbo vegetabilis	Vegetable Charcoal
38 Caus	Causticum	Caustic Tincture
39 Cepa	Cepa	Common Onion
40 Cham	Chamomilla vulgaris	Common Chamomile
41 Chi	China	Peruvian Bark
42 Cic	Cicuta virosa	Water Hemlock
43 Cim	Cimicifuga racemosa	Black Snakeroot
44 Cin	Cina	Worm-seed
45 Cist c	Cistus canadensis	Rock Rose
46 Clem	Clematis erecta	Virgin's Bower
47 Cocc	Cocculus indicus	Seeds of Cocculus
48 Coc cac	Coccus cacti	Coc cineal
49 Coff	Coffea cruda	Raw Coffee
50 Colchic	Colchicum autumnale	Meadow Saffron
51 Col	Colocynthis	Bitter Cucumber
52 Con	Conium maculatum	Spotted Hemlock
53 Cro	Crocus	Saffron

# TABLE OF REMEDIES.

---

GERMAN NAME.	ANTIDOTES.
1 Sturmhut. Eisenhut.	Vinegar, Coffee.
2 Fliegenpilz.	Wine, Coffee.
3 Keuschbaum.	Camphor.
4 Thonerde.	Ipecacuanha.
5 Amber.	Camphor.
6 Kohlensaures Ammonia.	Camphor.
7 Salzsaures Ammonium.	Oils Camphor, Coffee.
8 Malaccanuss.	Camphor, Coffee.
9 Schwefelspiegglanz.	Pulsatilla.
10 Honigbiene.	Vinegar, Arnica.
11 Blattsilber.	Puls. Merc.
12 Salpetersaures Silber.	Kitchen Salt.
13 Wohlverlei.	Camphor, Vinegar.
14 Arsenik.	Sesquioxide of iron.
15 Virginische Osterluze.	Camphor.
16 Stinkender Asand.	Camphor.
17 Haselwurz.	Camphor, Vinegar.
18 Blattgold.	Mercurius.
19 Salzsaures Gold.	Wine, Camphor, Mercury.
20 Kohlensaure Schwererde.	Sulphate of Soda.
21 Tollkirsche.	Coffee, Camphor.
22 Borax.	Coffee.
23 Bovist.	Camphor.
24 Brom.	Ammonia, Coffee.
25 Zaunruebe.	Aconite.
26 Cachinawurzel.	Nitric Acid.
27 Kohlensaure Kalkerde.	Bryonia.
28 Aetzkalk.	Arnica.
29 Phosphorsaure Kalkerde.	Opium, Vinegar.
30 Goldblume.	Lemonade.
31	Camphor.
32 Kampfer.	Camphor.
33 Hanf.	Camphor, Arsenic.
34 Spanische Fliege.	Camphor, Arsenic.
35 Spanische Pfeffer.	Coffee.
36 Thierkohle.	Ammonia.
37 Holzkohle.	Aconite, Cocculus.
38 Aetzstoff.	Arsenic, Veratrum.
39 Fwibel.	Tobacco.
40 Feldkamille.	Coffee.
41 Peruvianische Rinde.	Ipecac.
42 Wasserschieferling.	Zinc.
43 Schlangenzurzel.	Bryonia.
44 Cinasamen.	Camphor.
45 Steinrose.	Tea, Wine.
46 Brennwalddrebe.	Aconite.
47 Kockelsamen.	Vinegar, Honey.
48 Cochenille.	Camphor.
49 Kaffee.	Coffee.
50 Herbstzeitlose.	Aconite.
51 Holoquinthen.	
52 Fleckenschierling.	
53 Safran.	

ABBREVIATION	LATIN.	ENGLISH.
54 Crotal	Crotalus horridus	Rattlesnake Poison
55 Crot ole	Crotonius oleum	Croton Oil
56 Cup met	Cuprum metallicum	Copper
57 Cupr ac	Cuprum aceticum	Acetate of Copper
58 Cupr sul	Cuprum sulph	Sulphate of Copper
59 Daph	Daphne indica	Indian Daphne
60 Digi	Digitalis purpurea	Fox-glove
61 Dros	Drosera	Sun-dew
62 Dule	Dulcamara	Bittersweet
63 Eup	Eupatorium	Boneset, Ague weed
64 Eupho	Euphorbium	Spurge
65 Euphra	Euphrasia	Eye-bright
66 Ferr	Ferrum metallicum	Iron
67 Ferr ace	Ferrum aceticum	Acetate of Iron
68 Ferr mur	Ferrum muriaticum	Muriate of Iron
69 Fil m	Filix mas	Male Fern
70 Graph	Graphites	Black-lead
71 Glo	Glonoine	Nitro-Glycerine
72 Hama	Hamamelis Virginiana	Witch-Hazel
73 Helleb	Helleborus niger	Christmas Rose
74 Hep sul	Hepar sulphuris	Sulphuret of Lime
75 Hy acid	Hydrocyani acidum	Prussic Acid
76 Hyos	Hyoscyamus niger	Black Henbane
77 Hyp perf	Hypericum perforatum	St. John's Wort
78 Ign	Ignatia amara	St. Ignatius' Bean
79 Indigo	Indigo	Indigo
80 Iod	Iodium	Iodine
81 Ip	Ipecacuanha	Ipecac
82 Jalap	Jalapa	Jalap
83 Kali bi	Kali bichromicum	Bichromate of Potash
84 Kali car	Kali carbonicum	Carbonate of Potash
85 Kali hi	Kali hidiodicum	Iodide of Potassium
86 Kreaso	Kreasotum	Creasote
87 Kouso	Kouso	Kouso
88 Lach	Lachesis	Lachesis
89 Laur	Laurocerasus	Cherry Laurel
90 Led pal	Ledum palustre	Marsh-tea
91 Lye	Lycopodium clavatum	Club-moss
92 Lob	Lobelia	Indian Tobacco
93 Mag car	Magnesia carbonica	Carbonate of Magnesia
94 Mag mur	Magnesia muriatica	Muriate of Magnesia
95 Mangan	Manganum	Manganese
96 Mery	Meryanthes trifoliata	Buck Bean
97 Meph	Mephitis putorius	Skunk
98 Mer viv	Mercurius vivus	Mercury, Quicksilver
99 Mer sol	Mercurius solubilis	Soluble Mercury
100 Mer dul	Mercurius dulcis	Calomel
101 Mer iod	Mercurius iodide	Iodide of Mercury
102 Mer corr	Mercurius corrosivus	Corrosive Sublimate
103 Mez	Mezereum	Mezereon
104 Morph	Morphium	Morphia
105 Mosch	Moschus	Musk
106 Mur ac	Muriatis acidum	Muriatic Acid
107 Nat car	Natrum carbonicum	Carbonate of Soda
108 Nat mur	Natrum muriaticum	Kitchen Salt
109 Nit acid	Nitri acidum	Nitric Acid
110 Nux jug	Nux juglous	Walnut Shell
111 Nit	Nitrum	Nitre, Saltpetre
112 Nux mosch	Nux moschata	Nutmeg
113 Nux vom	Nux vomica	Vomic Nut
114 Olean	Oleander	Oleander
115 Ol jec	Oleum jecoris	Cod Liver Oil



## GERMAN.

- 54 Klapperschlangengift.  
 55 Crostonoel.  
 56 Kupfer.  
 57 Essigsaures Kupfer.  
 58 Kupfervitriol.  
 59 Indischer Seidelbast.  
 60 Fingerhut.  
 61 Sonnentau.  
 62 Bittersuess.  
 63 Durchwachsener.  
 64 Wolfsmilch.  
 65 Augentrost.  
 66 Eisen.  
 67 Essigsaures Eisen.  
 68 Salzsaures Eisen.  
 69 Männliches Farrenkraut.  
 70 Reissblei.  
 71  
 72  
 73 Schwarze Niesswurz.  
 74 Schwefelleber.  
 75 Blauseure.  
 76 Bilseukraut.  
 77 Hexenkraut.  
 78 Ignazbohne.  
 79 Indigo.  
 80 Iod.  
 81 Brechwurzel.  
 82 Trichterwinde.  
 83 Kromsaures Kali.  
 84 Kohlensaures Kali.  
 85 Hydriosaures.  
 86 Kreasot.  
 87  
 88 Lachesis.  
 89 Kirschlorbeer.  
 90 Porst.  
 91 Bärlapp.  
 92 Aufgeblasene Lobelia.  
 93 Bittersalzerde.  
 94 Kochsalzsaure Bittererde.  
 95 Braunstein.  
 96 Bitterklee.  
 97 Stinkthier.  
 98 Quecksilber.  
 99 Auflösliches Quecksilber.  
 100 Versuesstes Quecksilber.  
 101  
 102 Aetzsublimat Quecksilberchlo'de  
 103 Gemeiner Kellerhals.  
 104 Morphine.  
 105 Moschus.  
 106 Kochsalzsæure.  
 107 Lungensalz.  
 108 Kochsalz  
 109 Salpetersæure.  
 110 Nussbaum.  
 111 Salpeter.  
 112 Muskatnuss.  
 113 Brechnuss.  
 114 Oleander.  
 115 Stockfish Leberthran.

## ANTIDOTES.

- Arsenic, Ammonia.  
 Demulcents, Opium.  
 White of Eggs.  
 Mercury, Cocculus, Nux.  
 Hepar Sul. Ipic.  
 Bryonia, Rhus.  
 Acids, Camphor.  
 Camphor.  
 Camphor.  
 Quinine, Ipic.  
 Camphor.  
 Camphor.  
 Arsenic, China.  
 Kreosote.  
 Pulsatilla, Arsenicum.  
 Arsenic.  
 Arnica, China.  
 Camphor.  
 Vinegar.  
 Ammonia, cold affusion.  
 Vinegar.  
 Camphor, Vinegar.  
 Boiled starch water and Sugar.  
 Tincture of Galls.  
 Ipic. Lobelia.  
 Camphor.  
 Acids.  
 Milk, Mucilage.  
 Lemon-juice. Acids.  
 Arsenic, Ammonia.  
 Ammonia, Coffee.  
 Camphor.  
 Camphor.  
 Camphor, Ipic.  
 Pulsatilla.  
 Arsenic.  
 Coffee.  
 Camphor.  
 Camphor.  
 Gold Iodine.  
 Hepar Sul., Gold.  
 Iodine, Nitric Acid.  
 Nitric Acid.  
 White of Eggs.  
 Vinegar.  
 Quick emetics.  
 Camphor.  
 Magnesia.  
 Arsenic.  
 Nitric Ether.  
 Soap.  
 Aconite.  
 Camphor.  
 Wine, Coffee.  
 Camphor.

ABBREVIATION	LATIN.	ENGLISH.
116 Ol ric	Oleum ricini	Castor Oil
117 Op	Opium	Opium
118 Petro	Petroleum	Rock Oil
119 Phos ac	Phosphori acidum	Phosphoric Acid
120 Phos	Phosphorus	Phosphorus
121 Phy	Phytolacca decandra	Poke Root, Poke Berry
122 Plat	Platina	Platina
123 Plumb	Plumbum	Lead
124 Plumb act	Plumbum aceticum	Acetate of Lead
125 Pod pel	Podophyllum peltatum	May Apple
126 Puls	Pulsatilla	Wind Flower
127 Ran b	Ranunculus bulbosus	Crowfoot
128 Ran s	Ranunculus scellaratus	Malignant Crowfoot
129 Rhod	Rhododendron chrysanth'm	Liberian Rose
130 Rhus tox	Rhus toxicodendron	Poison Sumach
131 Ruta g	Ruta graveolens	Rue
132 Sabad	Sabadilla	Mexican Barley
133 Sabin	Sabina	Savin
134 Samb	Sambucus nigra	Elder
135 Sang	Sanguinaria canadensis	Blood Root
136 Sec	Secale cornutum	Ergot
137 Sen	Senega	Rattlesnake Root
138 Sep	Sepia	Cuttle-Fish Juice
139 Sil	Silicea	Silica
140 Spig	Spigelia	Pink Root
141 Spong	Spongia tosta	Burnt Sponge
142 Squi	Squilla martima	Squills
143 Stan	Stannum	Tin
144 Staph	Staphysagria	Stave's-acre
145 Stram	Stramonium	Thorn Apple
146 Sul	Sulphur	Sulphur
147 Sul ac	Sulphuris acidum	Sulphuric Acid
148 Symp	Symphitum officinale	Common Comfrey
149 Tabac	Tabacum	Tobacco
150 Tarax	Taraxicum	Dandelion
151 Tar em	Tartarus emeticus	Tartar Emetic
152 Tereb Ol	Terebinthina	Spirits of Turpentine
153 Teu m v	Teucrium marum verum	Wall Germander
154 Thu	Thuya occidentalis	Tree of Life, Arbor Vitea
155 Urt u	Urtica urens	Nettle
156 Xanthoxl	Xanthoxylum fraxineum	Prickly Ash
157 Val off	Valeriana officinalis	Valerian
158 Vari	Variolin	Cowpox Virus
159 Verba	Verbascum thapsus	Mullein
160 Ver alb	Veratrum album	White Hellebore
161 Ver vir	Veratrum vivide	American Hellebore
162 Vine	Vinca minor	Winter Green
163 Vio tri	Viola tricolor	Pansy
164 Zin Sul	Zincum Sulphas	Sulphate of Zinc
165 Zin	Zincum	Zinc

GERMAN.	ANTIDOTES.
116	Motion.
117 Opium.	Coffee, Camphor.
118 Mohnsaft, Steinœl.	Aconite.
119 Phosphorsæure.	Camphor, Coffee.
120 Phosphorus.	Milk of Magnesia.
121	
122 Platina.	Colchicum.
123 Blei.	Opium, Alum, Sulphuric Acid.
124 Essigsaures Blei.	Opium, Alum.
125 Schildblättriger Entenfuss.	Nux., Sul.
126 Kuechenschelle.	Coffee.
127 Hahnenfuss.	Coffee, Camphor.
128 Giftiger Hahnenfuss.	Camphor.
129 Siberische Schneecrose.	Camphor.
130 Giftumach.	Bryonia, Coffee, Lobelia.
131 Raute.	Camphor.
132 Sabadillasamen.	Camphor.
132 Sodebaum.	Camphor.
134 Flleder.	Camphor.
135 Blutwurzel.	Lobelia.
136 Mutterkorn.	Camphor.
137 Senegawurzel.	Arnica, Camphor.
138 Sepiensaft.	Aconite.
139 Kieselerde.	Camphor.
140 Spigelle.	Camphor.
141 Rœstschwamm.	Camphor.
142 Meerzwiebel.	Camphor.
143 Zinn.	Pulsatilla.
144 Stephanskærner.	Camphor.
145 Stechapfel.	Vegetable Acids.
146 Schwefel.	Acon., Camph.
147 Schwefelsæure.	Magnesia.
148 Wallwurz.	
149 Tabak.	Ipic. Nux.
150 Löwenzahn.	Camphor.
151 Brechweinstein.	Tincture of Galls.
152 Terpentinel.	Camphor.
153 Katzenkraut.	Camphor.
154 Lebensbaum.	Cocculus.
155 Brennessel.	Vegetable Acids.
156	
157 Baldrian.	Acon., Coffee.
158 Kuhpockengift.	
159 Kœnigserze.	Camphor.
160 Weisse Niesswurz.	Camphor, Coffee.
161 Niesswurz.	Aconite, Coffee.
162 Wintergruen.	
163 Stiefmutterchen.	Camphor.
164 Schwefelsaures Zink.	Hepar Sul. Ignatia.
165 Zink.	Hepar., Ignat.

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# PREFACE.

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In presenting this work, the publishers take a special pride, believing that it is a book that will be the means of saving many valuable lives and a vast amount of needless suffering from disease.

There has never been published any work on *domestic medicine*, which aimed to put in the hands of the people the vast amount of information, as to *disease*, its *causes*, the *circumstances modifying* it, its *course*, its *careful* and *systematic treatment*, and ALL THE SIGNS of the *pulse, tongue, breathing, digestive organs, evacuations, appetite, thirst, position, mental state, eyes, ears, nose, etc.*, and the indications of those signs, as *used by physicians*, in determining the nature of the disease and its probable termination; all this has been kept back from the masses by physicians as their individual stock in trade; here it is all shown in plain language. While the authors do not claim this as a purely original work with them, we claim that they have brought together in this compact form, the *gems of useful information*, gleaned from the whole field of medical art and literature, and adapted in language to the comprehension of the common reader, who is entirely unversed in the technical language of medical science.

While it has been necessary to use a *very few* of those medical words, whenever they do appear, there and then appears their meaning, enclosed in parenthesis. Efforts have been heretofore made to produce a book giving the treatment of a few diseases with their Allopathic and Homœopathic treatment, but *both* treatments written up by the *same* author; and in the nature of the human mind there would be some bias in favor of one or the other of the leading schools of medicine; and the treatment of the school of their choice would be fair, while that of the opposite would be more or less incomplete or unfair.

Here we offer a work complete; covering the whole field of the *art of medicine*.

The treatment includes only those remedies which have been proven by personal observations to be truly reliable: and are accompanied by practically verified curative indications in every case.

THE ALLOPATHIC TREATMENT, by DR. J. V. BEAN, must satisfy the friends of that school of medicine. As a staunch, rock-rooted, educated and experienced physician of that school, he stands in the front rank of his profession. While his education gives him command of the whole field of his art, his experience enables him to select his remedies from the

very best, and present them to his readers in the manner they can most safely use, and receive the most benefit from them. His language is plain, forcible, to the point, and very hard to misunderstand.

THE HOMEOPATHIC TREATMENT, following each separate disease, is clear, concise, careful, full and entirely reliable.

The "REPERTORY" is one of the many valuable features of this work. By its help the remedy may be *surely* and quickly selected that will most *certainly* remove any disease, or symptom of disease, that can be cured at all.

THE HYDROPATHIC is jointly treated by the authors in connection, with their treatment, whenever it may accomplish or aid in accomplishing the desired end.

DR. S. LUCRETIA ROBB has added many very valuable hints on the treatment of the diseases of women and children, suggested by, and proven to be good during, years of experience.

THE HOME REMEDIES.—A great many times, in cases of extreme emergency, there is *some simple remedy in the house*, which, if known, could be used, and thereby *cure*, or at least relieve, until something more could be done in the way of selecting a better remedy, or procuring the aid of a physician. These home remedies are pointed out and are always *safe* and at *hand*.

The Index is very complete. If you have any name for your disease you will find that in the index, and from the index will be guided to the description and treatment you are in search of.

While we do not expect or desire this work to entirely do away with the good, faithful physician, we do expect to make a very great reduction in the number of his professional visits and office prescriptions to every one of our subscribers. And we do hope and desire to assist in educating the masses of the people in the art of medicine, until it will be altogether impossible for any of those ignorant pretenders, now living off the ignorance of the people on this subject, to live at all. We aim to encourage every competent and educated physician, and by helping our subscribers to know the true and good from the false, we know we are surely gaining that end; and while greatly reducing the amount of his bill to any one family where our work enters, we increase greatly the number of families he will be called upon to treat; so you will see the good man prosper while the quack must tramp, bare footed, with elbows out, seeking for a victim, but no victim for him shall be found where this book enters.

With the strong conviction that we are offering a work of no ordinary merit, we present this to a deserving and appreciative public, believing they will, on examination, fully confirm our convictions.

THE PUBLISHERS.

# AUTHOR'S PREFACE,

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In undertaking a work of this character, it is but natural to feel the great weight of the responsibility assumed, taking the holding of the health and life of thousands upon thousands of fellow human beings, with all that life and health contains of usefulness, happiness, love and power, to individuals, families, communities, states and nations upon ourselves, we cannot avoid a feeling of terrible responsibility. A desire and deliberate determination takes possession of our minds to write nothing without *carefull consideration*—to hold *nothing back* from the people, that can give them a better understanding of themselves and their diseases.

In this work, we have endeavored to bring together in a compact form, all the information necessary to give the reader (without any need of other books) *all* the information needed to fully understand the *cause, nature, course and treatment* of any disease they may feel called upon to treat, or may in any way come in contact with. Following the description of the peculiarities of each disease, we have arranged a *carefully prepared* treatment. Those who believe in the ALLOPATHIC treatment, will find that full and complete, without any reference to any other treatment. Those who prefer the HOMŒOPATHIC treatment, will find that ample. Those who prefer to employ the HYDROPATHIC, or water treatment, will find a chapter giving full directions for the preparing and using the different baths; and in the treatment of separate diseases, you will find full and frequent directions for their use.

HOME REMEDIES receive special attention, and we believe that our readers will be surprised and highly pleased with this portion of our work.

We have omitted all treatment and reference to diseases of the sexual organs of a venereal nature. It is felt that their introduction into any work, save one of a strictly professional character, is highly improper. They are of so grave a character, and so long-lasting, and often terrible, in their effects upon the organism, as to demand the highest professional skill in their treatment.

We have included articles on the treatment of numerous complaints not heretofore included in any work on domestic medicine;—especially of those which are peculiarly prevalent in certain climates—such as



Tropical Diseases, etc.; directions for the discrimination between what is really a symptom of disease, and what is not, etc. The public is entitled to an explanation of the more cogent reasons we have for such a course and for so enlarging the work over others heretofore offered to the public.

First of all, the common sense of every reader will admit that we should write for the *many*, and not for individual cases—that we should attempt to embrace all contingencies as much as possible, and not confine ourselves to merely local circumstances; and that it does *not*, therefore, follow that persons whose situation and the like render any of these details *unnecessary* to them, should be *compelled* to adopt our suggestions simply because we have published them; whereas, it *does* necessarily follow, that those who are beyond the reach of any other resource—*either by reason of distance or want of means*—must *wholly* depend, either upon their own unaided judgment, or upon the directions afforded in works of this kind.

Suppose, for instance, a family resident in the center of a highly cultivated country, like this; that family is not, *therefore*, within easy and immediate reach of *the best professional* advice, in which case, it is best that a work like this *should be in the house* to represent the physician, in so far as that is possible.

But suppose another, and a very common case, as of the EMIGRANT to distant states and territories; to sparsely inhabited or desolate regions; from whence, we would ask, are these to obtain the professional advice which would be so essential to them, unless it be from such directions as we are able to afford them in a work of this kind? In this case, it must be admitted on all hands, that the work does good in comparison to its extent, amplitude, enlargement and comprehensiveness. Wherefore, then, should these essential conditions be withheld?

Again, these are not all the questions involved; there are yet more *real* points relating to the *variations* which may become necessary in the actual treatment of disease when once undertaken. In these cases, it is sufficiently obvious that those who *prefer* to exclude professional advice should be so far *removed from the chance of error* as possible, which cannot be done without ample detail, because disease has scarcely ever in two distinct cases, the same positive and exact characteristics.

It is for this reason, also, that we have entered so largely into the consideration of the "Investigation of the Patient and of Disease." We are convinced that the *great* fault of domestic works in general is, that they do not give *enough* information, and, consequently, that they often mislead instead of enlightening the reader.

It is obvious, that the presence of inherent constitutional defects may occasion external appearances of disease, which are especially susceptible of erroneous inferences, and therefore without this very important clue, the directions for the treatment of any particular disease may become a mere "will-o'-the-wisp" to lead the unprofessional reader into entanglements, and there leave him in utter darkness. We desire the reader, invariably, to consider the important reference alluded to, and, in fact, the whole of the introductory part.

It is, also, for these reasons, as well as for those already given, that we object to the extreme condensation of a domestic work, or to the limitation of its sphere to a particular class of diseases, and that we consider works founded upon this affected idea practically useless.

We *nowhere* enjoin the layman, who has means and immediate access to *educated and reliable professional* advice, to undertake the treatment of dangerous diseases *without it*. We only endeavor to provide for those who do *not* possess those advantages.

Upon such grounds as these, we beg to intrust this work to the verdict of a liberal and discriminating people, and to state that we anticipate a hearty *welcome* to our evident endeavor, even if the product of our labor should fall short of its earnest purpose.

R. L. R.



# INTRODUCTION.

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It is my purpose in writing a description of the treatment of disease for popular use, to represent as fairly and plainly as I can the principles and practice of the REGULAR PROFESSION OR SCHOOL OF MEDICINE, in a manner which can be comprehended by all. It is not my intention to present an exhaustive treatise upon the practice of medicine in all its departments. That has been ably and thoroughly done in many recent works on the practice of medicine by Flint, Bristowe, Bartholomew and others.

It is a matter of great importance how far it is proper to interfere in the management of diseases. Obvious is the fact, that in the great majority of cases, diseases will, without special treatment, end in recovery. It is not to be supposed, therefore, that every instance of recovery is a cure. The prevalence of quackery depends largely upon the popular error, that the favorable termination of disease is always owing to the means employed. The greater the enlightenment of the public upon this subject the less frequent will be imposition in medicine. The fact is, that disease, as a rule, tends to recovery and not to death, by the powers of nature alone. In all such diseases, the true course of treatment is indicated by a study of the way in which nature effects her cure and in following that course. Much harm is often done by the unnecessary employment of medicines. It is therefore a rule which should never be violated, that active treatment should not be employed, except in cases where it is certain to do good.

It should not be inferred that proper treatment is useless. On the contrary, even in cases which would end favorably if trusted to nature alone, much good may be done by shortening the duration of the disease, relieving the sufferings of the sick, and in preventing unpleasant and even dangerous consequences. In other instances, proper treatment is the means of saving life. The successful application of remedies and the power of choosing between those of less or greater energy depend upon experience and observation (or knowledge) not only, but a logical mind, judgment, common sense, and tact.

THE GENERAL RULES FOR TREATMENT of the sick may be summarized as follows;

1. The removal of the cause upon which the disease depends, is among the most important. In many instances this suffices. For exam-

ple, nervous headaches may depend upon the continual use of coffee; dyspepsia upon improper food and insufficient exercise in the open air; colic upon irritating matters in the bowels, etc., etc. Causes are also sure to interfere with a cure, as cholera infantum and the summer diarrhœa often resist treatment until the patient is removed from the air of a large city to the country. In other cases, the cause once operating ends its influence and adds nothing thereafter to the violence of the disease, as in most of the contagious diseases. In other instances, the cause generally ceases when it has produced its effect, as is often the case in inflammation resulting from cold. Attention to the cause is important in the treatment, as far as it leads to a correct estimate of the nature of the disease. In endeavoring to remove the cause of disease the attention must be directed to those within the system as well as to the external agents. One disease action is frequently the result of another, so that by removing the cause of the first the latter trouble is cured.

2. *The exact seat of the disease should be ascertained*, and, as "the life is in the blood," it should be determined whether or not this is in the blood, and if so, its condition should be corrected and improved. Many cases are known to have continued for weeks and months obstinately resisting treatment or which only temporarily improve, quickly relapsing again, which have immediately and permanently yielded to treatment calculated to restore the blood to health. Even when the depraved condition of the blood is only secondary, measures to correct its condition are almost equally important, for the health cannot be regained while the blood remains impaired. Most diseases affect the solid tissues and it is obviously necessary to restore the proper grade to the vital actions.

3. It may be stated, as a general law, that diseases are rarely stationary. They tend to get better or to get worse. This fact affords valuable indications for treatment.

It should be determined whether the disease *intermits* or not—*i. e.*, whether the pain, fever, or other disordered sensation or action returns at regular intervals of time, and going off again after a longer or shorter period of duration; or whether the disease *remits*—*i. e.*, becomes less violent at regular intervals. Such diseases will yield to the treatment known as anti-periodic, which will be given in the article on the treatment of intermittent fever.

Some diseases run a definite course and cannot be safely interrupted, such as the irruptive fevers. In such cases, when fully formed, proper management consists in preventing or removing injurious influences, mitigating their violence, correcting, as far as possible, any tendency to a fatal issue, and conducting them to a favorable termination.

There are diseases which are indefinite in their course, and have a tendency, when not unusually severe, to get well sometime, and are often arrested or shortened by treatment. The apparent danger should be then kept in view and energetic measures never used, if moderate means will accomplish the end.

Again, there are diseases which have a tendency to a fatal result unless interrupted. These must be checked with mild means, if you can, but with the most energetic, if necessary.

Then again, we find there are diseases which are necessarily fatal in their character, or at least are so in the present state of our knowledge. Here our endeavors should be to support the powers of life and so prolong it, and to relieve the suffering of the patient and render him more comfortable.

In the diseases involving great danger to life, the way in which the affection will cause death, affords an important guide in treatment, by means of which a fatal termination may be averted. In many cases, the whole aim of treatment will be to obviate the tendency to death. For our purpose here, we can reduce all modes of death to two, viz.: by interruption of respiration (called *apnœa*), and by failure of the circulation or exhaustion (called *asthenia*). These two modes of dying may be combined. The best illustration of the first mode named, (*apnœa*), is furnished by cases of strangling. Other instances are in diseases involving obstruction to the passage of air to the lungs, or which make them incompetent to receive air, as croup and other inflammations of the air passages, catarrhal fever in children, extensive inflammation affecting both lungs, dropsy of the lung or pleural sac and acute consumption. In all these cases the obvious indication is to supply oxygen to the blood. Obstruction to the circulation may be caused by paralysis of the heart, by over-distention, by pressure upon the great vessels by tumor, by dropsy of the sack covering the heart (pericardium), or coagulation. In these cases the indication is to prevent or overcome, if possible, these obstructions. But in all diseases which prove fatal by exhaustion, the mode of dying is by *asthenia*, as in the continued fevers fatal of themselves. The indication is then to obviate this tendency by tonics, nourishment and, perhaps, also by stimulants.

4. The use of remedies is also governed by the stage of the disease. In the commencement of a disease, experience shows that a measure may be effectual in arresting its progress which would be harmful or useless at any later period in its course. A beginning cold is frequently cut short by a full dose of opium or Dover's powder, but so favorable a result would not follow later in the case. Depletion is frequently useful in the commencement of diseases, but is harmful when advanced; on the other hand, stimulation is frequently of great importance in the latter stages of acute prostrating diseases, where, if employed at the commencement, would have worked an injury. When one disease follows or appears in the course of another, or an accompanying symptom develops an undue importance, great watchfulness and frequently new measures of treatment are demanded.

5. *The condition of the system* at the time of the attack has the most important bearing upon the treatment. Measures which would be proper in a robust, hearty person with an abundance of healthy blood, would be wholly unsuited in a feeble constitution, and those in whom the blood is impoverished or vitiated. The latter would necessarily require tonic and supporting treatment from the very first, while depletion might be beneficial in the former. The circumstances under which the patient is constantly placed, or those to which he was exposed previous to the occurrence of the disease, must be taken into account.

The age of the patient has an important bearing upon treatment. Infancy is well known to be more than proportionately susceptible to many medicines, and while the restorative processes are rapid, the system is also easily depressed below the point of recovery. Supporting treatment is early called for in prolonged diseases of infants. In advanced life, though less susceptible than middle life to the action of medicines, excesses, of any kind whatever, are not well borne, caution is demanded and large doses should never be given.

Supporting measures are demanded earlier in the course of disease in the old than in middle life, though excessive stimulation is not safe.

Women are more susceptible than men, and should be treated more delicately. Particular care is required during menstruation, and unless treatment is demanded, it should be suspended during menstruation. In pregnancy, all purturbating treatment, such as emetics and cathartics, should be avoided.

Individual peculiarities should be considered; any special susceptibility or peculiar action of a remedy dictates its avoidance in those persons.

Hereditary influences must be considered; the known constitutional habits of the parents should be weighed and govern the treatment of the child.

For example, the child of scrofulous parents should, under some circumstances, be treated differently from one in whom there is no hereditary morbid predisposition.

The habits of the patient have an important bearing upon the treatment, and should be thoroughly investigated and known. Exhaustion from immoral excesses; debility and impoverishment of the blood from insufficient food in quality, or variety, if not absolute starvation and bad air; gluttonous indulgence of the appetite; intemperance in the use of alcoholic drinks and the effects of one's occupation or business, all have an important bearing upon the treatment. All these conditions call for supporting treatment at once and often for stimulants.

Previous disease often leaves a debility which calls promptly for supporting treatment. Peculiar tendencies to different diseases (diatheses) such as rheumatism, gout, consumption, etc., modify greatly different diseases, and may impress upon them more or less of their own character. The patient cannot be properly treated without giving these facts their proper bearing.

6. Co-existing influences often modify greatly the disease results of particular causes. The most prominent of these, are the *epidemic* (a widely prevailing disease), or *endemic* (a locally prevalent disease) *influences* and the *miasmatic*, especially marsh miasma, which causes ague and other periodical diseases. Without attending to these influences which modify disease, the treatment will be liable to be attended with fatal blunders. In all miasmatic districts, it is well known that all diseases assume a character resembling more or less closely the periodical fevers with which these districts are invested. In all these localities, especially in autumn and winter, when other fevers, from whatever cause, and also inflammatory diseases, exhibit the remittent character of the proper miasmatic (or marsh) fever, we also see the best results follow the administration of quinine. Epidemics, (wide-spread prevalent diseases) it is



well known, impart more or less of their own character to all coincident diseases. Sometimes, notwithstanding the epidemic influence, there is maintained a vigorous state of the system; when this is the case, the type of disease is said to be ethenic. At other times, the tendency is to a feeble and weak, or typhoid, condition; this is said to be asthenic. The latter condition calls at once for supporting and nutritious measures, and in the former, these measures are not as early called for, and even depleting remedies may be useful.

7. The pointing of nature, as shown by the expression of wants by the patient, should not be disregarded, but should be watched for and cautiously gratified, even though they are opposed by the dictates of our own reason, or even to the whole course of our experience. It is sometimes noticed that the patient, during the progress of a severe disease, expresses a wish for some drink or article of food, or some change in other respects, which would seem to be highly improper. As such wants are expressed, often as the mere result of restlessness, or whim of the patient, it should, of course, be properly denied. But if the same wish is repeated from time to time, against the authority of physician, attendant and the judgment of the patient himself, it may be looked upon as a real want of the system, and indication by nature which ought to be complied with. At first it should be gratified cautiously, and in a manner that little harm could result, if it should happen to be a mistake. If good should result from careful trial, a greater indulgence may be permitted. On this point, Prof. Geo. B. Wood forcibly says: "The practitioner will often be gratified at witnessing a rapid recovery, dating from the moment of his judicious surrender of his own judgment to the imperious call of the system." If error is committed on this point, let it be on the side of caution.

8. In the treatment of any disease, it is a good general rule to attend to the state of the functions (secretions and excretions) and to correct any disorder there, even though they are not directly connected with the disease. Especially should the bowels be kept regular, and constipation (fecal accumulations) carefully guarded against. The secretions of the skin and kidneys should be maintained, as nearly as possible, in a healthy state, and to this end, frequent examination of the urine is to be made. An irregular circulation, the temperature and nervous action should also receive attention. By these means alone, we occasionally cut off one of the chief sources of disease, and give great aid to recovery, for it is not always easy to determine how far diseases are mutually dependent.

J. V. B.

# OUR FAMILY PHYSICIAN.

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## Part First.

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### CHAPTER I.

#### THE METHOD OF INVESTIGATING THE CONDITION OF THE PATIENT, OF DISTINGUISHING BETWEEN A STATE OF HEALTH AND DISEASE, AND OF DETER- MINING THE PECULIAR NATURE OF THE DISEASE.

The investigation of the condition of the *PATIENT*, and the discrimination of the particular nature of the *DISEASE*, are evidently essential to appropriate treatment. It is, therefore, imperative that a work of this kind should contain such simple regulations on this head as may lead unprofessional persons easily and simply to a clear and positive resolution. Such an investigation may properly be divided into two distinct sections, namely: first, the general investigation of the *patient*, and secondly, the particular investigation of the *disease*.

#### 1.—THE GENERAL INVESTIGATION OF THE PATIENT.

The general investigation of the patient should comprise a scrutinizing inquiry into the particular constitution of the individual—the temperament—the antecedents of the patient's family, as of the general health, habits, etc., of the parents, and of each of their families respectively—the sex and the relative state of the secretions especially, consistent with the state of health in such sex—the age of the patient, and the circumstances which qualify this condition—conditions, impressions, or habits, etc., which are *individually* peculiar to the patient—the *weak* or particularly susceptible part, and what, if any, be the particular affections to which the patient has been subject—the general habits, occupation, method of living, diet, etc.,—the relations between the climate and the individual, or any transitions of climate to which the patient may have been exposed.

#### 1. THE CONSTITUTION AND ITS VARIETIES.

A *plethoric* (*sanguine constitution*), or full habit of body, characterized by redundancy of animation and vital energy in health, and a prevailing and predominant activity in the circulative system; the complexion being florid and glowing, the frame full and stalwart, the limbs generally active the spirits and muscular apparatus buoyant and elastic, the generation of natural warmth abundant, and the *pulse full and strong*; but, consequently,

with susceptibility to inflammatory influences, and a predisposition to local, organic, or general congestions or suffusions or emissions of blood.

A *feeble constitution*, as opposed to the foregoing—in which fatigue is naturally a ready consequence of exertion; when the breath will easily be exhausted by sudden or rapid motion; when the generation of heat will be naturally deficient, and the operation of the functions generally slow and easily impeded, or vexed by being the least overtaxed, the muscles being readily wearied and incapacitated—the secretions varying from excess to deficiency or suspension—and the organs being either too readily provoked and stimulated, or very dull and insusceptible of external circumstances—and the *pulse being naturally feeble, soft and yielding*. The patient is consequently subject to diseases characterized by torpidity and utter inaction of the functions, or by excessive relaxation.

A *bilious constitution*—characterized by dark and somewhat turgid skin, or even by superabundant yellowness of the skin, (an imperceptible proportion of yellow in the skin, observed on close examination, being indispensable to a really healthy complexion), and by the readiness with which the *liver* sympathizes in and becomes affected by every external or internal contingency with predisposition to derangements affecting the digestive functions and the stomach generally, and to irregularity of such functions; as also to dark colored urine, costiveness (with dark motions), and piles;—the *pulse is apt to be wiry*.

An *apoplectic constitution* (a subdivision which is important *here*), characterized by the short, thick-set, or close full frame, with large head, apparently buried between the shoulders, the neck being very short and thick, and the *pulse* being more or less of the character of the plethoric habit, and the patient being predisposed to sudden rushes of blood to the brain.

A *nervous constitution* (a variety which is often found in combination with the *bilious*), especially characterized by predominant excitability of body, of mind; absence of fixity (or changeableness) of ideas, habits, inclinations, etc.; irritability, and extreme sensitiveness and inequalities of temper—the *pulse* being accordingly also variable, easily subject to *exceeding acceleration*, but often subsiding, in sedate moments to a movement *slower* than is customary. The patient is subject to the various affections so difficult of distinction and classification, which come under the head of *nervous diseases*; such as spasmodic affections, fits, apparently traceable to no distinct cause, fugitive and inexplicable pains, particularly such as are aggravated by *very slight touch* or by *approximation*, but which are *relieved by pressure*.

A *dry, wiry, constitution* (not uncommonly combined with the *bilious* or *nervous*), characterized by swarthy complexion, sharp, deep-set features, searching glance, persistently dry condition of the skin; firm, hard, wiry condition of the muscular and tendinous fibre; deficiency of flesh and angular frame; generally, also, rapid motion and quick perception; the urine is dark, the motions are habitually hard and scanty, the secretions and transpirations are usually deficient, and the *pulse* is generally distinct and wiry, but commonly, also, *quicker* than that of the nervous habit (when unexcited). The patient is subject to inflammatory



affections—to which the intestines are especially predisposed—as also to diseases generally, which occur (as it were) with superabundant animal power.

*A lar, lymphatic, or mucons constitution.*—These three varieties, which are, indeed, susceptible of very nice distinctions, are, however, sufficiently analogous to be united in a work of this kind, they are opposed to the foregoing. The complexion is generally fair, the flesh apparently full, but soft, flaccid, and puffy; the skin pallid, the frame rounded, the muscular and tendinous fibre unstrung, yielding, and relaxed; sensations of chilliness prevail, and the individual is usually more sensitive of cold than of heat, but is also alive to immoderate elevation of the latter; the natural generation of heat is deficient, the circulation sluggish, the pulse being slow, (sometimes rather full, but always soft, easily compressed, *yielding*). The patient is subject to the transmutation of every disease into a sluggish, persistent, or *chronic form*, (the crises and resolution being in general imperfect), to superabundant secretions or accumulations of phlegm, to catarrhal affections, to abscesses, to excessive discharges of phlegm, etc., etc., to the accumulation of water (by decomposition or imperfect composition of the blood) about particular organs, or throughout the body (generally as the immediate consequence of inflammation), and sometimes to the sudden suppression of discharges.

*The catarrhal or rheumatic constitution* (nearly analogous to the last, but having one very distinctive feature in the susceptibility of the external surface), characterized especially by want of sufficient activity and *nervous tension* and vitality in the skin; which therefore remains easily affected by every external circumstance, effects transpiration very defectively and inadequately, and is apt by being susceptible to the sudden suppression or repercussion of such transpiration to reconvey the morbid humors which have been expelled by internal organs upon those organs themselves, and thereby to generate diseases of the character indicated by the nomenclature which we have selected. A very decided feature of this habit of body consists of extreme susceptibility to derangement of digestion, which, if *inherited*, may be considered as the predisposing cause to such tendencies.

*A constitution in which the skin is especially liable to become diseased (psoric)* (more distinctly capable of individual classification than the *scrofulous habit*, but yet a mere modification of the latter),—distinguishable by the predominance, recurrence, or continuance of irregular and unhealthy secretions from the skin, and irregular action of the glands associated with it: eruptions of various characters—ulcerative sores, general foulness—which seem to appear as the result of every affection of whatever kind, and either to accompany or to follow every derangement.

*The consumptive constitution* (in the majority of instances again, a modification of the *scrofulous habit*, but more subject to appropriate classification in a work of this nature)—identified in general by very clear, transparent skin, bright flush-spot on the cheeks, especially on the left cheek; flatness of the chest, and hollowness on the breast-bone; slender, attenuated, lengthened, fragile frame; elongation and spareness of the neck; prominent protusion of the shoulder-blades; sudden and rapid

growth ; prevalence of heat of the hands after eating ; irritability of the circulative system ; and consequently a *pulse* characterized by *smallness and quickness*. The patient is particularly susceptible to complications affecting the lungs, resulting from every inflammatory or irritative process (which is also very frequent and readily provoked) ; to want of breath and complete exhaustion after every unusual degree of exertion, especially after rapid motion, and often in consequence of mere mental excitement or momentary irritability ; to inflammatory affections of the lungs and adjacent membranes (and expectoration of blood), which will ever be liable to result in decay of those organs.

## 2. THE TEMPERAMENTS AND THEIR VARIETIES.

The temperaments are subject to an infinity of individual peculiarities which might constitute separate divisions, but which, in our estimation, will be more readily comprehended by the reader in his investigation into *individual characteristics*. We shall, therefore, confine the division of temperaments to the following distinctions, which even are often compounded, and which should be held to modify the relations of morbid manifestations.

*A sanguine temperament* (usually associated with a *plethoric constitution*)—which is characterized by habitual animation and buoyancy of spirits, gayety, good humor, etc.; the mind and body are alike quickly stimulated into excessive action, but every affection or disturbance is usually of as rapid a course, and brief a duration, as it is severe while it lasts. The bodily health is usually good and strong,—and slow or lasting diseases are of rare occurrence; but the majority of affections, (which have a predisposition to assume a violent and inflammatory type) are exceedingly severe when they do occur, and run a very rapid course.

*A choleric temperament* (usually associated with the *bilious constitution*) characterized by the violence of the reaction occasioned by any irritation, or stimulus, or impulse, and particularly by its severe implication of the biliary apparatus, which, with increased and altered secretion of bile reacts upon the moral and mental faculties, and has a tendency to engender a liability to the provocation of ill-humor, and even vengefulness and malignity, or to rancor and acrimony of temper, upon the revival of causes of excitement. The complexion is usually swarthy, with a yellowish tinge; the muscular and tendinous fibre hard, wiry, and tightly strung; the hair dark, and the features acute or deep-set. The patient is subject to bilious derangements,—and to bilious complications with every derangement, not uncommonly provoked by the violent fits of excitement to which he is constitutionally subject.

*The melancholic temperament* is identified by the slow, meditative disposition; the gloomy, retiring, solitary, and hypochondriacal temper; the tacit, latent, and unobservable progress of affections produced by external impressions but silently harbored. Every impression is deep and lasting, and broods upon the mind and body; but the patient is not subject to violent impulses, nor very susceptible to sudden impressions, the organs being none the less alive to such impressions; the sensibility is apparently blunted or subjected to the reflective powers. The body is

alike slowly but progressively affected by external circumstances. The patient is subject to diseases affecting the intestinal apparatus, especially, which assume a chronic and continuous character.

A *Phlegmatic temperament* (which is usually associated with the *feeble* and *lax*, or *lymphatic constitution*),—is distinguishable by the tardy operation of all functions, mental as well as bodily; by the slowness with which irritation or stimulation is produced, and by the no less remarkable *slowness*, as well as by the *inadequacy* of the reactionary power. The predispositions are to be gathered from the remarks on the “feeble,” and on the “lax,” or “lymphatic constitutions.”

### 3. THE ANTECEDENTS OF THE PATIENT'S FAMILY.

We should pay especial attention to the general health, habits, or particular diseases (if they be known) of the parents of the patient, and of the paternal and maternal relations, which may serve to elucidate the origin of a bad habit of body, especially if such diseases as *scrofula* (in any of its multiplied forms), cutaneous disorders, consumption, gout, piles, etc., be distinguishable as habitual with any member of the family, *whose constitution could have been inherited by the patient*. This is a most essential consideration; for it will *very frequently be found that when a remedy is distinctly indicated in the case, it fails to operate without previous PREPARATORY treatment*; and we are puzzled by the failure; *whereas, after the previous administration of an apposite PREPARATORY remedy, the medicine already distinguished as appropriate, but administered without effect, frequently becomes signally successful*. This is generally owing to hereditary defects of constitution. For remedies, see Repertory.

### 4. THE SEXES AND THEIR DISTINCTIONS.

In the male we anticipate redundancy of animal strength, vigor, energy, and circulative power, and we must consider *disease* in a modified or aggravated aspect, according to the ascendancy or deficiency of these characteristics.

In the female we may anticipate more acute sensibility, greater tenderness and excitability, and a less vigorous and persistent reactionary power. We must not, moreover, omit to consider the conditions dependent peculiarly upon the organs of parturition, etc., and upon the functions associated with them; the progress of pregnancy, and the generation of milk; or, on the other hand, the presence of *periodical* derangements should be duly considered in relation to every simultaneous derangement.

Relaxation of fibre and lymphatic accumulations are also (to a greater or less degree) inseparably associated with the peculiarities of the sex; and the greater intensity and additional sphere of nervous sensibility should lead us to consider, with great caution, such nervous spasmodic or hysterical indispositions as occur associated with *natural* predisposing causes.

### 5. THE AGE AND THE CONDITIONS WHICH QUALIFY IT.

Age is not to be considered without regard to conditions of previous health, or disease—of habits, manner of living, climate, avocations, etc., etc., especially in relation to persons who have attained maturity. It

may, however, (subject to such modifications) be considered under seven distinct sections, viz.—childhood constituting three, maturity two, and decline two.

1. In the earliest period of childhood (the first of infancy) extending to the period of the earliest teeth, the human being is extraordinarily susceptible to external influences; sensitive to a higher degree, and consequently alive to any sudden irritation from apparently slight causes; the brain in particular is liable to precipitation of blood, and the acute sensitiveness of the whole nervous structure renders spasmodic affections predominant.

2. In the second period of childhood—extending to the seventh year *in our climate*—we have to consider the natural irritability of the system, the want of firmness of fibre, the susceptibility to fatigue, readily obviated by the provision of nature,—a preponderance of tendency to rest; and we have to anticipate the occurrence of organic inflammations, particularly as connected with the respiratory or cerebral apparatus, and irregularities in the accumulation of flesh.

3. In the third period of childhood—extending to the beginning of manhood or womanhood—the equilibrium between the functions, faculties, etc., being better established, and the tissues having become inured to external influences, we should consider the occurrence of such affections as already described more minutely with reference to particular habit of body, circumstances, individual habits, avocations, etc., situation and other local and general external causes.

4. In the period of approaching and progressive maturity—extending to the twenty-fifth year in our climate—the vigor of the circulative system should be developed;—it is then, also, that we may anticipate the serious development of latent or declared bad habits of body, *traceable to parentage*, and particular care should then be taken,—especially if in infancy or childhood a course of constitutional treatment has been neglected,—to neutralize or modify such *constitutional defects*—affecting the Lungs and the Brain especially—as in Epileptic or Consumptive affections; both being considered in due relation with the progress of sexual powers.

5. The period of maturity—extending generally from the twenty-fifth to forty-fifth year in our climate—must especially be considered in relation with habits, mode of life, avocations, locality inhabited, transpositions of climate, (if any) etc., etc., because any of these circumstances may tend very materially to lengthen or abbreviate the stage of *vigorous maturity*. In some cases we may extend it to the fifty-fifth year; in others it may as reasonably be limited to the thirty-fifth year. In general, the period of *maturity properly so called*, (whether of long or short duration) is characterized by continual, even, regular, and vigorous operation of all the functions and faculties.

6. The first period of decline—which may at present be said to extend, in our climate, generally, from the forty-fifth to the fifty-fifth year—may be distinguished by diminished activity of mind and body, supervening irregularity of the functions, decreased powers of *endurance* and



strength, returning susceptibility to external influences, and debilitation of the attributive powers of either sex. This period, whether deferred or premature, is almost infallibly distinguishable by such characteristics.

7. The second period of decline, or old age, which may set in from the fiftieth to the sixtieth year, in our climate,—or sooner or later, according to antecedent circumstances, is indelibly characterized by the decrease of acuteness in the perceptive faculties, and in the organs which convey sensations—as of light, sound, smell, taste, and sensitiveness of touch,—by growing obtuseness of moral and mental sensibilities; by decreasing retentive mental power;—by general attenuation of frame, diminution of physical power, stiffness of joints, muscles, etc., aridity and puckering of the skin, the development of latent defects of circulation, and the like.

#### 6. INDIVIDUAL CHARACTERISTICS.

The peculiarities of individual patients, and the particular effect of particular external influences, etc., upon them, both as to mind and body, should be very carefully considered; and it is absolutely necessary, for the thorough appreciation of the distinctive points relating to the case of a patient, with whose habits, constitution, and susceptibilities, etc., we are not perfectly conversant, that we should most carefully gather the history of the particular and characteristic mannerism (if it may so be termed) which identifies him. *Every person*, whatsoever, must in some point or other be considered to constitute an *exceptional case*, and be so studied for successful treatment.

#### 7. AFFECTIONS, ETC., TO WHICH (IF ANY) THE PATIENT IS ESPECIALLY LIABLE.

It can hardly occur that a patient is not more subject to one class of disorders than to any other; and although this, to a certain extent, falls within the pale of the considerations suggested above (see 6.), yet there is one essential point to be considered here, namely, the issue or *final crisis*, in which such disorders terminate,—which is ever characteristic.

#### 8. METHOD OF LIVING, AND GENERAL HABITS.

It is a most important comparison to institute, in the study of any case,—to consider the relation between the *habit of body* or *disease*, and the method of living, occupation, etc. The habits may be especially considered in respect of the following distinctions:—(1) whether sedentary or active; (2) whether the chief exertion be of mind or body; (3) whether the locality generally inhabited be of a close, artificial (town) or of a free natural atmosphere; (4) whether the clothing, food, and other comforts, or even necessities of life have been *sufficient*, but *moderate*, or excessive, (both as to quantity, in proportion to actual requirement, or richness,) or *deficient* in quantity simply, or, not only insufficient, but also unwholesome; (5) whether the domicile and person, or either, have been habitually cleanly, carefully attended to, or foul and neglected, (as to domicile, particularly as to *cleanliness*, *drainage* and *ventilation*; order and regularity are, however, also essential); (6) whether the habits as re-

gards feeding and fasting, labor and rest, etc., occupation or want of occupation, have been regular or irregular, desultory or uncertain.

With excessive confinement, close atmosphere, deficiency of exercise, etc., we may associate affections of the stomach and liver (especially), of the digestive functions generally, and depression of spirits, as also (if the place of occupation be of a foul atmosphere), affections of the lungs. With excess of mental labor, we may associate nervous complaints, and habitual irritative fevers. With insufficiency or unhealthy kind of food, deficient ventilation, drainage, and cleanliness, we associate low fevers, eruptive fevers, typhoid and putrid, or even intermittent complaints, and skin diseases. With excess of nutrition and indulgence (in comparison to physical exercise), we may associate inflammatory complaints, and rushes of blood to particular organs. And in all cases analogically we may ally the nature of the complaint with the nature of the habits, occupation, food, etc.

#### 9. THE PART OR ORGAN ESPECIALLY SUSCEPTIBLE.

By investigation into the most frequent result of casual, accidental, external or internal causes, we may readily ascertain what part of the system is particularly liable to irregular or unhealthy action. And this research is ever requisite, because every individual will be found to have one organ especially susceptible, and liable to become deranged by causes, in some cases even, such as would seem to involve any other complication, rather than that which actually occurs.

#### 10. ATMOSPHERIC AND OTHER LOCAL INFLUENCES.

The atmosphere, soil, etc., of particular localities, is known to be prone to engender particular derangements. It is also known that the water of particular springs and rivers, whether owing to the presence of mineral substances, to excessive hardness, or to other causes, has a tendency to generate particular diseases. It is, therefore, very important that these and the like particulars should be submitted to close investigation.

### 2.—INVESTIGATION OF DISEASE.

#### BY CONSIDERATION OF THE CAUSE, GENERAL CHARACTER, EXAMPLES, AND PARTICULAR SYMPTOMS.

The investigation of disease, may properly be confined to the consideration (1) of the various general, particular and local causes; (2) of the general character of the disease; (3) of the general characteristics of the disease, as compared with existing or recorded examples; (4) of the Symptoms:—which last must again be divided into the consideration of the PULSE, its varieties and indications; the discharges generally; the nature of the blood, if any be discharged, the state of the digestive functions; the mouth and tongue; the eyes, the respiration, and its peculiarities; the peculiarities of complexion, motion, action, or inactivity, appearance, etc.; the symptoms exhibited by the nervous system generally, and especially by the brain, etc.

## 1. THE CAUSES OF DISEASE.

These are either what may be termed constitutional causes, which consist in any unhealthy condition of the system, and for the distinction of which the reader should consult the part on "Constitution," or they are more *immediate*, as those hereafter subjoined :

This latter class of causes consists :—*First*. Of such as may be traced to *individual exposures*, *excesses*, etc., or to particular conditions, either of locality, dwellings, atmosphere, circumstances, habits, particular susceptibility, constitutional predisposition, *foregoing diseases*, and consequent deterioration of constitutional strength, etc., all of which belong more especially to the "investigation of the patient," and have already been recited.

*Second*. Causes which are peculiar to a district, country, climate, or particular spot, and which are then designated as *endemic*. Almost every district, especially such as are remarkable for rapid evaporation, excessive and sultry heat, stagnant waters and rapid decomposition of vegetable matter, or marshes with little or no drainage, or bleak exposed situations, where dry, cold, and searching winds prevail, and the waters are hard, and generally impregnated with mineral substances; for sudden and frequent changes of temperature; for general flatness of country, or for elevated and irregular surface; for winds of a particular character, and from a particular quarter; whether inland, insular or coasting; whether the prevalent occupation be that of *factories* or *fields*; and whether the habitations of the people are isolated, well ventilated, well drained, generally clean, or *closely packed*, squalid, small, dark, loathsome, ill-drained, and ill-ventilated. These, and many local distinctions of a similar character, will tend to render the generation and prevalence of particular diseases, properly speaking *indigenous*, or endemic, and should therefore be duly considered.

*Third*. Causes which are of a general, indeterminate character, such as heat, cold, damp, draught, and particular electric relations, but which are prone to become associated with sudden transitions of atmospheric condition, and which will be the more surely developed by the presence, or precedence, of certain other diseases arising from similarly *indeterminate* causes, by the superabundance of particular natural products (vegetable or fruit), or by the deficiency of food, as in cases of famine, or by calamities of various kinds. These are generally classed as *EPIDEMIC* causes, and are properly divided into three sections, viz.: those which occur regularly at certain seasons; those which are of continuous duration, and are apparently of incessant development, such as small-pox, measles, scarlet fever, etc.; and those more properly and exactly epidemic, that is, which appear under particular electric, and other conditions, from time to time, scouring whole regions, and whole continents, etc., wherever the like circumstances tend to engender them, but which then unaccountably subside.

It is worthy of especial notice, that all three general classes of these *causes* engendering *disease*, are to be removed, modified, extenuated, or



even eradicated, by judicious management, by the *removal of the direct causes* (if any be apparent), or by the *preparation of the system* by means of specific remedies.

## 2. THE GENERAL CHARACTER OF THE DISEASE.

This is determinable by considering the various manifestations in conjunction with the state of the circulation or action of the heart as distinguishable in the condition and peculiarities of the PULSE, which alone can serve distinctly to characterize disease.—PAIN is very generally no criterion, except as qualified by the PULSE;—the muscular and nervous action is usually no criterion, except as qualified by the PULSE; the digestive functions, secretions, discharges, etc., etc., will often leave the degree of progress, danger, or curability in disease undetermined, without reference to the PULSE; to the consideration of which we will therefore proceed.

## THE PULSE: ITS VARIATIONS AND INDICATIONS.

### 1. THE ART OF FEELING THE PULSE IN ORDER TO DETERMINE ITS CHARACTER ACCURATELY.

*First.* Avoid feeling the pulse abruptly, and until the patient has been beguiled (if possible) by irrelevant conversation.

*Second.* Make such an investigation of the history of the case as to assure yourself that there may not be some immediate casual circumstance calculated to have fluttered, or otherwise affected the patient, and thereby to have disturbed the pulse more immediately.

*Third.* Place three of the fingers upon the artery on the inner side of the left wrist of the patient, having the thumb so applied to the back of the wrist that the pressure which you apply to the artery can be modified, increased, etc., in any and every degree; and that thereby, and by so varying the degrees of pressure (having a considerable length of the artery under the three fingers) you may be able, not only to distinguish the number of beats which occur in the minute, but also the particular nature of such beats; as, for instance, whether by pressure you can apparently suppress the gush of blood through the vessels; or whether, when strongly pressed, the current seems to worm through beneath the fingers like a wire; or whether the bound is so strong as apparently to force the fingers away in its impetuous passage; or whether the pulsations are very sudden, distinct, abrupt, and as it were, convulsive; or whether, on the other hand, the pulsation appears to linger and to pass languidly; or, whether, again, there is no distinct pulsation, but a rapid thrill, rather to be denominated a *vibration* than a pulsation. In order thoroughly to distinguish these variations, it is imperative that the attention should be absolutely centered in this one object, and not distracted by any other circumstance.

### 2. THE AVERAGE STANDARD OF HEALTH.

The healthy pulse of an adult (in the stage of maturity) male person of large and expansive frame, should (with the modifications before mentioned under the head of "Constitutions") be firm, not compressible, but

sensibly urged through the artery, notwithstanding pressure, yet neither hard (conveying a shock to the touch), sudden and twitching, nor like a thread worming its way beneath the fingers; but moderately full, even, regular, and numbering from 70 to 75\* beats in the minute.

The healthy pulse of an adult (in the stage of maturity) male person, of smaller frame and proportions, should, in general, number from 72 to 78 beats, subject to the same general characteristics in other respects.

The healthy pulse of an adult female should, with the same general reservations, number from 80 to 85 beats in the minute; but we should not anticipate as strong or full a pulse in a woman as in a man; nor, indeed, should we always attach much importance to the *casual* precipitation of the pulse, especially of highly-nervous females.

The healthy pulse of a young person in the second stage of childhood, viz. from seven to fourteen years of age, should number from 80 to 86 beats in the minute.

The healthy pulse of a child under seven years old, from the period of teething, may be stated at from 86 to 96 beats in the minute.

The healthy pulse of an infant, before teething, may be stated at from 100 to 120 beats in the minute according as the child is robust or weakly; the robust infant generally exhibiting a less frequent but stronger pulsation.

The healthy pulse of the first stage of declining life may be generally stated, for the male, at 70 beats; and for the female at 75 beats in the minute.

The healthy pulse of the second stage of declining life (that is, old age), may be stated for the male, at from 55 to 65 beats; and for the female, at from 65 to 70 beats in the minute.

### 3. GENERAL INFERENCES DEDUCIBLE FROM THE PULSE, ETC.

1. *Palpitation of the heart.*—The palpitation or pulsation of the heart, when felt distinctly, and predominantly, or when even *heard*, or so severe as to reverberate, as it were, through the frame, and to shake the side, etc., may be considered as characteristic either of—

Nervous irritation, the result of sympathetic disturbance originating in the stomach, especially if worms be present; of hysterical and other spasmodic affections; of severe bodily suffering, or of violent emotion, etc., and when the result of hysterical disposition, should occasion no apprehension; or of—

Excessive debilitation, resulting from loss of blood, or other severe, excessive and protracted discharges, in which case it generally terminates in a *swoon*, which, if casual, does *not* indicate organic disease of the heart; or of—

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\* If, however, the pulse be *habitually* slower or quicker, we should assume this as an *individual standard*, because instances are upon record of the pulse of healthy adult males varying from 30 to 50 beats. Young infants are known to have a pulse numbering from 140 to 150 beats. If the skin be *moist* at a *natural heat*, and *not* flushed, this would be *no* sign of disease. The pulse also varies before and after meals.

Sudden determination of blood to the heart, or other organs, which, in females, should apprise us of an approaching menstrual crisis (if in due season); or of—

Organic disease of the heart, when it will be characterized by continuance, or very frequent recurrence, constantly terminating in loss of consciousness.

2. *The pulse*—will serve to determine the most essential questions respecting disease, such as (1) the degree of vital power possessed by the patient; (2) the nature of the disease, that is, whether or not inflammatory action be present; (3) specific characteristics of the disease, that is, whether it be the result of superabundant strength of the blood and system, or whether it be occasioned by, or attended with, a depressed condition of vital energy; (4) the degree of progress made by disease upon the vital power, and consequently the greater or less degree of urgency; (5) especially in highly critical cases, when no other distinct index is afforded, the selection of the *appropriate reactionary remedy*; (6) according to the greater or less degree of impression made upon the pulse by such administration, whether or not we have properly selected, and *how far* we should be justified in *changing the medicine*.

#### 4. VARIOUS NAMES OF ALTERATIONS OF THE PULSE.

1. *Frequent pulse*—A term applied to the succession of the beats. By this we understand simply an increased rapidity of repetition.

2. *Slow pulse*—The designation of a pulse less rapid than in health.

3. *Quick pulse*—A term which designates the rapidity with which the current passes through the artery at each beat, qualifying the character of the beat; whereas *frequency* (as above) is a term denoting the rapidity with which one beat follows another.

4. *Sluggish or Tardy pulse*—Expressive of the languid, extended nature of the beats.

5. *Hard pulse*—Expressive of the sensation or firmness and positiveness which it conveys to the touch.

6. *Soft pulse*—expressive of the smooth flow (so to speak) of the blood beneath the pressure of the fingers.

7. *Strong pulse*—The denomination of a pulse, which seems to bound beneath the touch, and repel compression.

8. *Feeble pulse*—That which yields to compression, apparently deficient of vigor to force its way in spite of pressure.

9. *Large pulse*—Expressive of the dilation and expansion of the artery, as evinced to the touch.

10. *Small pulse*—Expressive of the apparent retraction of the artery, and the minute channel through which the blood passes, as evinced to the touch.

11. *Full pulse*—A denomination applied to a pulsation which seems thoroughly to *fill* the artery at each beat; whereas the *large pulse* is only understood of a *dilating current*, without conveying the idea of *solidity*, as of a well-filled vessel.

12. *Empty pulse*—When the beats do not seem to convey a very distinct *elevation* to the artery, and which appears as a combination of the characteristics of the *soft* and *small* pulse.

13. *Unequal pulse*—That which, without being *suspended*, does not beat at regular intervals of time, or in which the *quality* of the current (as hard, soft, feeble, full, etc.,) differs with different beats.

14. *Intermittent pulse*—Or that which is characterized by the occasional suspension of beats.

##### 5. INDICATIONS ATTRIBUTABLE TO THESE VARIETIES, RESPECTIVELY AND JOINTLY.

1. A very important distinction to be determined, namely: whether the disease is characterized or engendered by excess or deficiency of vital power; that is, by over-luxuriance, or poorness of blood, is to be evinced by the strong, hard, (incompressible) pulse on the one hand, and by the soft feeble (compressible) pulse on the other hand; the *first* being indicative of excess, and the *second* of deficiency of strength.

2. Another distinction in determining the nature of the disease consists in the explicit indications afforded by an *unequal*, or *changeable* pulse, which, in acute cases, identifies the malady as *nervous*, not *inflammatory*, and, in chronic cases, as irrespective of the circulation, and associated with the nervous system only. Thus we should be most cautious not to mistake cutting, stitching, pricking, or shooting pains in the chest, or violent fixed pains (even with violent throbbing), or pains in the chest, (as just described), with suffocative oppression of breath, accompanied with such a state of pulse, for *inflammation*; for the pulse would herein distinctly identify purely *spasmodic* or *neuralgic* suffering.

3. A healthy pulse, or a pulse of a purely nervous character, as just described, attending affections of the chest, and especially of the *air-passages*, is precisely, in some cases, the unmistakable index of *ASTHMA*, in contra-distinction to *CONSUMPTIVE* affections, which are ever *characterized* by a *feverish*, feeble, irritative, accelerated pulse.

4. The *accelerated pulse*, if unqualified by any other feature, exhibits irritation, or fever (properly so called), or increased susceptibility to irritation, which may result from mechanical causes, tending to lessen the scope of the heart as (tight-lacing, etc.); or from cold in particular, which has caused an irregular retrocession or congestion of blood; or again, from an increase in the richness or quantity of the blood, which destroys the equilibrium between the motive action and the current of blood. Increasing acceleration is indicative of *increasing* inflammatory action; subsiding rapidity is indicative of the removal of the irritation and analogously of its cause. If the frequency of the pulse *continues* or *returns after a crisis* (resulting in perspiration, sleep, etc.), we may judge that the effort of nature was incomplete, and that therefore a continued effort remains. Frequency of pulse may be associated with the *over-strong* or *over-feeble* state of the circulation, and will be more continuous and difficult to subdue when qualified by feebleness than by strength; it will also in many cases be more excessive. Thus, in cases in which the pulse is *very frequent*, (as,

for instance, 120 to 180, or even 200 beats in the minute,) it is also *small* and then points out the lowest state of debility, or what is called a putrid condition. This is, indeed, an imperfect pulse, and sometimes proceeds to a mere thrill of vibration, when it is totally *indistinct*. An analogous sensation may, however, be conveyed in very severe cases of "inflammation of the substance of the lungs," as an *inflammatory* pulse; but then the artery will be *dilated* and *full*, if a long breath be drawn and held; whereas the pulse of debility is qualified by a *small, retracted*, artery. Again, if the pulse be accelerated, and also strong, or full, and *hard*, we may distinguish a decidedly inflammatory condition—inflammatory fever.

5. The *small pulse*, unqualified by any other condition, is indicative either of *weakness* or of spasmodic condition, which may be easily determined by the accompanying or antecedent circumstances, and by the following distinctions:—

If associated with *hardness* (small and hard) it is especially indicative of a convulsive state.

If associated with *softness* (small and soft), it is especially characteristic of debility.

Further we may study the following distinctions, either singly or in association:—

The *slow pulse* (if not habitual—some adult subjects, especially males, having habitually a pulse varying from thirty to fifty beats in the minute, *without disease*), is indicative of insufficient quantity of blood—as after severe depletion—of advancing age, of the subsidence of fever (which frequently leaves a reactionary pulse *below* the standard of health), or of pressure on the brain, as in cases of congestion, water in the head, etc. Associated with the following variety, especially after concussion of the brain, etc., it is of a serious character.

The *sluggish or tardy pulse* particularly distinguishes a torpid condition and a low typhoid character assumed by the disease, and pressure on the brain, when it is of more serious import than the *slow pulse*, and of still more serious consequence when associated with the last.

The *hard pulse* (simply) indicates especially *inflammation*, (as in fever, etc.; or a convulsive condition (when qualified by evidences resulting from the investigation of the nervous symptoms distinguishing this condition. In old age again, the *hard pulse* (especially if *large*) is of very frequent occurrence, as caused by the drying, contraction, or even ossification of the arteries, which convey this sensation to the touch, owing to a decrease of suppleness or elasticity.

The *soft pulse* (simply) proves the absence both of inflammation and convulsive condition.

The *strong pulse*, which indicates superfluity of blood, a full habit.

The *feeble pulse*, indicating deficiency of blood, an attenuated habit.

The *large pulse* (simply) indicates an unimpeded elasticity of action, and is the truest index of the absence of cramp, irritation, or excessive irritability; it is the distinctive feature, especially after acute inflammations, of a vigorous operation of the heart, and proves that there is an ample sufficiency of blood *in active circulation* (consequently no local or organic determination); the *large pulse* (when unqualified by other features) is



therefore to be considered as a proof of the effectual resolution of an irritative effort, (such as fever), when it sets in at the crisis.

The large pulse may, however, be associated with *fullness* (only) when it points out the insufficient liquefaction of blood (or thickness) in which case it is easily compressed, as often occurs in typhoid fevers, (with debility), and when it is a spurious fullness; or, again, the large pulse may be associated with *fullness and hardness*, when it clearly indicates irritation of a peculiar kind.

The *full pulse* distinguishes a plethoric or full condition or habit of body.

The *empty pulse* offers indications analogous to the "*small and soft*," (as above stated).

The *unequal or changeable pulse* generally characterizes a universal nervous condition, and is one of the distinctive features of nervous fevers, or of fevers resulting from, or accompanying deficient vital energy. It also indicates spasm at the heart, or even a deeper and organic derangement of the heart, or deficiency of elasticity or energy in the action of the heart; and it may also, in cases of inflammation of the substance of the lungs, be held to indicate such a state of congestive or other obstruction as impedes the progress of the current through those organs, when, consequently, it is a most serious symptom.

The *intermittent pulse*. In this we may especially distinguish a spasmodic condition of the heart, (sometimes organic disease), particularly *sympathetic*, as resulting from intestinal affections, such as congestive determination of blood, or such as excessive relaxation of the bowels, or predisposition to relaxation.

#### THE CONDITION OF THE BLOOD.

By this division of investigation it must not be suspected that the inspection of blood abstracted by venesection is indicated, for the use of the lancet is the *great and grievous error* which has been effectually superseded. The artificial abstraction of blood is, therefore, as an all but invariable rule, out of the question. But it will often occur, when the condition of the blood affords very distinctive indications of the nature of the disease or of the system generally, that *spontaneous* or *casual discharges* take place, which we may have an opportunity of investigating. We should principally notice a tendency to coagulate very quickly, or too firmly, or in too great a relative proportion to the fluid residue; or, on the other hand, an excessive predominance of the fluid proportion or absence of coagulation.

1. Coagulation which is too rapid, firm, or too great in proportion to the fluid residue, especially if further qualified by the superficial floating of very little of the watery humor, (which is one of its constituents), that, again, being coated over the surface with a very firm white skin, is positively indicative of inflammation, tendency of the disease to develop inflammation, or predisposition of the patient (if in health) to attacks of inflammatory disease. Coagulation, in general aspect as just stated, but which throws up a superficial skin, of detached, unconnected, woolly, or yellowish, or sometimes greenish appearance, distinguishes an irritation of a nervous rather than of a specifically inflammatory character.

2. Insufficiency of the watery constituent, that is, when all or almost all of the blood is dark and thick, indicates a highly bilious habit of body.

3. Superabundance of the watery humor as a constituent of the blood, that is, when the tendency to coagulate is slow, and affects only a small portion (and that often of a paler color than is usual), and when the greater part resolves itself into a watery superfluid, indicates a deficiency of power to appropriate and distribute the nourishing portion of the food for the sustenance and uses of the system; and (if of menstrual blood) a constitutional disposition to debile disorders, such as "green sickness."

4. Absence of healthy coagulation, the blood being dark, but remaining entirely commingled in all its component parts, not separating the watery humor, and remaining in a thick inadhesive condition, (not jelly-like), indicates what is termed a putrid condition, or that stage of dissolution in which the vital energy sinks from deficiency of power to expel what is mischievous (as in putrid typhus); and, in general, a scorbutic habit of body, which involves a predisposition in every disease to assume a *putrescent* character.

5. A dark, yet clear, red blood, indicates strength, and a sufficiency of *reactionary* power.

6. Black, or very dark purple blood:—which is associated with such diseases as result in predominance of venous over arterial blood, and which may indicate organic defect of the structure of the heart, particularly if the complexion have a bluish or purplish hue; and which may also indicate a highly bilious complication of intestinal derangement in scorbutic subjects (particularly), more especially if the blood be muddy, thick, and black.

7. Pale blood, from superabundance of watery fluid, also characterized by excessive liquidity, indicates constitutional weakness in the predominance of the watery humor as a constituent.

Pale blood (from light redness of the coagulating portion) indicates a pernicious constitutional habit, such as the constitution heretofore described as "Rheumatic."

8. The watery humor (as a constituent of the blood) thoroughly and distinctly separated from the coagulating portion, which is deposited in a firm jelly (and without any of the *unhealthy* manifestations described under 1) above, may be assumed as an index of a *healthy process of circulation*.

9. The watery humor (as a constituent of the blood) appearing whitish and thick, indicates deficiency of constitutional vigor, especially in the distribution of nutriment.

10. The watery humor (as a constituent of the blood) appearing of a distinctly yellowish hue, indicates an admixture of *bile* with the *blood*.

## 2. SPONTANEOUS DISCHARGES OF BLOOD GENERALLY.

If the discharge be from the nose, in cases of inflammation of the brain, severe determination of the blood to the brain, or of inflammatory



fever of any kind, the symptom is to be considered as a wholesome crisis.

In general, discharges of blood may appear as the crisis of a disease, particularly of severe fever; but they may occur as the result of local determinations of blood or inflammations, of over-due fullness and distension of the vessels, of precipitation of blood upon a weak part, (or, generally, of comparative deficiency of firmness and strength in such part, as when a blood-vessel is broken); or again (as a most critical symptom) of a putrid condition.

### THE URINE, ITS VARIETIES AND THEIR INDICATIONS.

From the consideration of the blood and its appearances, we cannot transfer our attention more appropriately than to the like variations in the urine, as the discharge, the processes attending the secretion of which are most intimately connected with the blood.

#### 1. THE HEALTHY APPEARANCE OF THE URINE.

Unaffected by any of the subjoined or other particular circumstances of age, sex, method of living, active, or sedentary, particular articles of food or drink, the season of the year, and as a most important exceptional condition, the constitution of the patient—the urine should be of a pale, brightish yellow or straw-colored, remaining clear after standing, precipitating no sediment, and of the peculiar ammoniacal smell, but devoid of all loathsome odor.

*Exception 1.* However, in old age, it is consistent with health that the urine should be offensive, lessened in quantity, and deepened in color.

*Exception 2.* Amongst females a degree of sediment is not always an unhealthy sign, and the urine is habitually of a paler hue.

*Exception 3.* With respect to the habits of life, it may be reserved that a person leading a very active life, with especial predominance of physical exertion, should emit darker and more scanty urine than the stated standard—and, that in an individual of very sedentary habits, it should be characterized by more copious but paler discharge.

*Exception 4.* As to eating and drinking, it may be stated as an exception to the general rule, above, that certain vegetables (especially those of a diuretic nature), such as asparagus, will usually cause the discharge to be offensive; other substances will give it a bright, gold yellow; excess of stimulating liquor will render the discharge pale and copious, etc.; whereas, also, within about six hours after eating, it will commonly be cloudy.

*Exception 5.* The increase of constitutional vigor, or perhaps more immediately the greater enjoyment of open-air exercise which the summer affords, tends to render the urine darker and more scanty, whereas, in winter (that is, under contrary circumstances,) it is usually less highly colored and more abundant.

## 2. THE PROPER TIME AND METHOD OF INVESTIGATION.

The urine should not be examined, or at least no reliance should be placed upon its manifestations, within less than six hours after a meal; and such of the urine as is reserved for investigation should then be set aside in a place where the temperature is *even and moderate* for at least two hours, not being at all exposed to sudden transitions of temperature in the interval, after which we may examine whether any of the subjoined evidences be present.

## 3. THE VARIATIONS APPARENT IN THE URINE, AND THEIR INDICATIONS.

1. With respect to the progress of *fevers*, the urine affords the most valuable characteristics, varying with each stage, as the result of the febrile course is developed; as, for instance:

Before the fever has taken any turn towards issue, that is, so long as it continues to rage without any tendency to a crisis, the urine, of whatever color, is emitted (and remains after standing) perfectly transparent and clear; or, in other cases, (especially nervous fevers, and fevers in which the digestive functions are predominantly implicated,) the urine will be emitted (and will continue the same, and without deposit after standing,) thick and cloudy.

2. As the determination of the fever approaches, the urine, which was previously clear, will become thick, and will begin to form a small half-floating cloud, or sometimes even a similar cloud completely buoyant, or which, should it sink for a time, will rise again completely to the surface. The two latter are, however, indicative of a somewhat unfavorable issue in the imperfect completion of the crisis, whereas, if, on the other hand, the cloud formed in the urine sinks, we have reason to anticipate a wholesome resolution.

3. The actual determination or crisis of the fever is distinguishable by the precipitation of a sediment (simply),—in cases in which the urine had previously been clear,—and by the like precipitation of a sediment, and the complete clearness and transparency (as if filtered) of the over-floating fluid, in cases in which the urine had previously been muddy and thick.

But for this precipitation of a sediment to constitute a *wholesome indication*, it should, also, be smooth, undisturbed, light,—assuming an apparent, slight, rounded, elevation towards the center,—white, or of a slightly gray color. It should not constitute more than one-fifth or one-fourth (at the most) of the whole volume discharged, and it should be deposited quickly after the emission. For, otherwise, it is a bad sign; as, for instance:

If black, or very dark, it indicates a putrid condition.

If of the color of bile, or red, it characterizes an intermittent type of disease, or sometimes of a rheumatic tendency.

If white and gritty, or deposited from dark, turbid urine, there is depraved habit of body, or perhaps some concreting substance in the urinary canal.

Or, generally, if disturbed, irregular, of a purple hue, muddy, heavy and constituting from one-half to two-thirds of the whole volume discharged, it is a bad sign.

4. In general:

If the URINE BE RED when the *pulse is accelerated*, there is a decisive and positive indication whereby to distinguish constitutional fever, inflammatory action, and increased development of internal heat,—from a similar *condition of pulse*, which might otherwise characterize a purely spasmodic affection.

If of a deep saffron-color, it represents the admixture of bile in the blood, etc.; and if this hue be conveyed to white absorbent surfaces moistened with it, it decisively indicates jaundice.

If it be thick and black, here is an indication of such a degree of inflammatory or putrid condition, as resolves itself into gangrene.

If bloody, turbid, thick, and depositing an excessive proportion of sediment, we have an evidence of approaching decomposition of the blood.

If, other things being equal, it be characterized by the floating of an apparently oily substance on its surface, we have an evidence of what may be termed advanced constitutional decay.

If matter be mingled with it, there must be internal suppuration.

If the urine (of children) appear, as it were, *milky*, we have reason to deduce the presence of worms in the intestines.

If it be thick, but pale, or still more, if it be very changeable in appearance, during the course of a fever, we have reason to look upon the disease as of a nervous kind.

If it be clear, transparent, and *watery*, and there be continual urging to discharge it, the nature of the affection is distinctly spasmodic.

If it be bloody, there is probably a degree of inflammation about the bladder or kidneys.

If slimy, we deduce a discharge of the character of phlegm from the bladder, or obstruction of the neck of the bladder by some concreting substance.

Or, again, as regards the manner or sensations which characterize the discharge:

If the discharge be *involuntary*, the affection is of a paralytic character; but it should, also, be noticed that in such cases of FEVER as evince this symptom, it is sometimes very difficult to ascertain whether it is *really involuntary* (in the true sense of the term). If really so, it is a serious manifestation.

If, on the other hand, the discharge be either difficult, painful, or impeded, it variously represents disease of a locally, inflammatory, or spasmodic nature.

6. Or, further, as to the antecedent circumstances:

It should be noticed that sudden check of perspiration will often occasion an exceedingly copious and watery discharge of urine.

Whereas excessive relaxation of the bowels, the previous use of drastic purgatives, or profuse sweating, will frequently cause a darker and more scanty discharge.

CHEMICAL AND MICROSCOPIC DISTINCTIONS, and the distinctive features of other varieties in respect of the urine, have been intentionally omitted, as calculated to lead unprofessional persons into erroneous experiments.

## THE FUNCTION OF BREATHING: ITS VARIETIES AND THEIR INDICATIONS.

In many diseases, especially those whose seat is in the respiratory apparatus, the manner of breathing, the pains, etc., developed by the act of breathing, the sound emitted by the inward and outward passage of the breath, etc., are the only signs upon which we can rely for a thorough and *distinctive* appreciation of the nature of the affection, with the reservation, however, that the relations between the *pulse and respiration* are never to be overlooked. In all diseases, especially in those of an inflammatory or putrid character, there is much important insight into the direction, etc., of the malady, acquired by a careful consideration of the operation of this vital function.

### I. THE BREATH IN HEALTH.

The frequency, and even the manner, of breathing, in individual cases, is best determined by the habitual conditions of both. But, inasmuch as there should be about four pulsations to every act of respiration, it may be deduced that, in health, supposing the medium standard of the adult pulse to be 80 beats in the minute, there would be 20 *in-spirations* and 20 *re-spirations* in the same time: and in the like proportion.

The breathing would also be *easy, slow* in repetition, and in inhaling and exhaling *equal and full*. It is not, however, to be inferred that the *relative equality of proportion* between the beating of the pulse and the expansion of the lungs is in itself a sign of *health* (as will presently transpire), although it may be assumed therefrom that the blood is not deteriorated in quality, on the one hand, and that the operation of the lungs is not organically affected, on the other hand.

### 2. THE VARIATIONS TO WHICH BREATHING IS SUBJECT, AND THEIR INDICATIONS.

*Frequent respiration*—by which is understood a rapid and continuous succession of inspirations and respirations—is an evidence either of accelerated circulation or FEVER, and consequently of organic inflammatory affections, or of inflammatory affections of any kind, involving constitutional disturbance; and also of insufficient (elasticity) strength of the lungs. Frequency of respiration, when associated with *smallness* or *shortness*: that is, with inadequate expansion, is an evidence of some obstruction which oppresses the operation of the lungs; as, for instance, created by congested blood (as in inflammation of the lungs), by the presence of water in the cavity of the chest, (or even, in severe cases, in the cavity of the belly), by inflation with wind (the oppression being

communicated by the contiguity of the lungs to the inflated parts of the stomach), or by the alteration of the substance of the lungs, etc.

This variety is opposed to the *habitual* degree of slowness in the breathing of health.

The *slow* (unfrequent) breathing, when *less* frequent than in health, and further qualified, by *deep breathing* at remote intervals as if in a convulsive effort, is frequently associated with spasmodic affections, swooning, etc., and is an evidence of want of strength.

The *quick respiration*—a term by which is understood that the *in*-spiration is incomplete, and is quickly succeeded by the *re*-spiration—is occasioned by the presence of some oppression or obstruction, which renders the expansion of the chest so painful as to *hurry* the operation of decreasing the pressure by expelling the air; it is almost invariably the result of any severe inflammatory affection of the intestines, or apparatus of respiration, and commonly occasions a more sudden and spasmodic effort to expel the air, as manifested in COUGH. It is opposed to the healthy *tardiness* of respiration; that is, to the deep, slow, *protracted* inspiration, and respiration, with power to *hold* the breath (full) for a length of time.

*Tardiness*—may, however, be excessive, as resulting from weakness.

The *deep* or *long breath*—when even, protracted—as to the inhaling, and exhaling—noiseless, and evidently without effort, is one of the characteristic features of *healthy respiration*; but, when deep, long breath, is evidently the result of a severe effort, somewhat difficult, irregular, sonorous, and sometimes abrupt, it becomes an evidence of *spasmodic* affection,—especially involving the anterior portion of the cavity of the chest and abdomen, or, sometimes, of great fullness of the vessels about those regions; or, again, (as if there be a long pause between the explosion of one draught, and the re-inspiration of another) of a condition of stupor and delirium.

The *small* or *short breath* (simply)—may be considered an evidence either of weakness, or of spasm. We have already noticed this variety, as associated with frequency.

*Difficult breathing*—implies several distinct varieties, either of which may appropriately bear this name. In any degree, difficulty of breathing may be associated with coldness of the extremities (especially the feet), confusion and heat of the head, and empty, small and remittent pulse, owing to the obstructed and dilatory progress of the blood through the lungs. If casual, difficult respiration may be attributed to some accidental or even mechanical cause of oppression. As a symptom of disease, it would arise from the presence of any obstructing matter, blood or water, etc., impeding the action of the lungs and air-passages, etc.; or as a symptom, unattended with any evidence of inflammation, it would be occasioned by spasmodic affection of the respiratory apparatus.

*Mourning* or *sighing breath* is a variety of *difficult* respiration, and seems rather to identify the enveloping membranes of the lungs as the seat of the affection.



*Oppressed breath* (simply) may arise either from impeded digestion, from particular conditions of atmosphere, or from affections of the air-passages.

*Panting Breath* rather identifies obstructions (such as thickening of the lining membrane) in the *windpipe*, and air-tubes.

*Suffocative breath*—that is, when the breath is totally arrested by recumbency—may result from extravasation (pouring out) of blood on the lungs, etc., from the accumulation of water, from alteration of the substance of the lungs, or from what is termed paralysis of those organs; in any case it is a most urgent symptom. In all respects it is opposed to the *easy* breathing, or to the habitual degree of *ease* in breathing, which characterizes the healthy state of the patient.

*Warm breath* (simply)—indicates a degree of fever; if *very hot* particularly if the extremities be cold, it is a positive index of general, internal inflammatory action, or more particularly of inflammation of the *substance of the lungs*, or of some of the adjacent intestinal parts.

*Cold breath*—indicates a deficiency of vigor (superfluity of watery humor) in the blood, and consequently *sluggish, languid* circulation. It may result, however, from obstruction which prevents the effectual passage of the blood through the lungs. As a symptom appearing with the *sudden suspension of pain*, and with *general dullness of sensation in severe organic inflammation*, it indicates internal mortification; in any case, as attendant upon the last stage of a very critical disease, it is a fatal sign.

*Unequal breath*—an expression which conveys its meaning—may, in very severe cases, result from obstructions impeding the inhalation or exhalation of the air (chiefly in the *windpipe* and air-tubes), or it may be occasioned by purely *casual* circumstances; as, for instance, spasmodic affection of the nerves connected with the respiratory apparatus. It is opposed to the *equal* breathing of health.

*Noisy respiration*—or that which is attended with unnatural sounds, is subject to several modifications—as, for instance, *whistling breath*, which, in the majority of cases, indicates the result of spasm, or of accumulation of phlegm, etc., in the *windpipe*. *Rattling breath*, which may result from the presence of matter, blood, or phlegm, partly obstructing the air-tubes; or, as a fatal sign, it is the result of paralysis of the lungs. *Flapping breath*, or that which is accompanied with an occasional sound, as of the sharp flapping to and fro of a dry valve, indicates the presence of very adhesive matter or phlegm in delicate cells connected with the air-passages. *Crackling* or crepitating breath, which, as associated with inflammation of the lungs, would be qualified by the other distinctive symptoms of that disease, may (particularly in aged persons) indicate deficiency of moisture in the lining membrane of the air-passages.

*Oppressed breathing*, or oppression of the chest, will be treated of under the head of *anxiety*, (see “Pain,” etc).

*Offensive or fetid breath*—a symptom which requires no further description, but which must be considered in due relation to other circumstances—as, for instance, going too long without food, will engender it.

The menstrual periods are sometimes attended with it. Excessive use of mercury, under any treatment, is another ascertainable cause.

A *scurbutic habit of body* (or that in which every affection has a disposition to resolve itself into a greater or less degree of putrescence) is unmistakably discernible from this symptom, when continual and *habitual*. Excess of animal food may occasion it. Decay of the teeth and inattention to the proper cleansing of the mouth and teeth, will almost inevitably induce it. In typhus, it characterizes the putrid degeneracy of the disease. In affections of the chest it usually characterizes suppurative processes in the lungs, etc. As a general rule, especially in the absence of any particular conditions, such as have been stated—foulness of the stomach, or the presence of worms, or other impure substances in the intestines, may be distinguishable by *offensive breath*.

### THE DIGESTIVE FUNCTIONS, AND THE INDICATIONS WHICH THEY AFFORD.

The digestive functions, as is well known, afford some of the most palpable indications of derangement; and inasmuch as the nutritive or tributary process is entirely centered in this portion of the system, one very important deduction is dependent upon its condition; namely, the sufficient or insufficient degree in which the subsistence of the whole constitution is provided for by the processes acting upon the food, and, in the *habitual* state of the digestive process.

Persons of habitually strong digestive powers are more likely to resist the injurious effects of external circumstances; such as heat, cold, infection, sorrow, etc., etc.; but once attacked with disease (especially inflammation), they are prone to be very seriously affected. At the same time disease will be more likely to run a rapid course with such subjects, and to terminate promptly, than to degenerate into chronic disease.

If the digestive process be *habitually* weak, we have a general indication of precisely contrary conditions.

#### 1. THE EVACUATIONS AND THEIR INDICATIONS.

**COSTIVENESS.**—Suspended or deficient evacuations may be the effect of inflammatory tendency; or of muscular debility; or of inaction of the lower intestines; or, again, of deficient or altered discharge of bile from the liver into the intestines; or of general debility of the system and poverty of blood. Suspended evacuations may, however, be occasioned by mechanical obstruction of the bowels, as the lodgment of improper substances, etc.; whereas deficiency of discharge may result from excessive discharges or transpirations of another kind.

*Very dark* evacuations may be either associated with costiveness or relaxation, and in both instances they usually, when not induced by the nature of the food, evince an exuberance of bile.

*Hard* evacuations are of various kinds:—as hard and large, hard and small (detached), hard and knotty, etc.; in general they exhibit a deficient degree of natural irritability in the lining membranes, more or less excess of internal heat, and deficiency of moisture.

**RELAXATION**, as understood, not only of less consistent, but of more *copious* evacuations, is also subject to variations in the frequency,

color, odor, etc., of the motion. In general, it may result from inflammatory or nervous irritability of the intestinal canal; or from the presence of obnoxious, irritating substances, impurities, etc.,—such as undigested food, worms, etc.,—therein; or from suppression of other discharges; or emotions; or again, from a debilitated condition of the bowels, or of the entire system.

If the discharge be green (of an infant), acidity is commonly exhibited; if dark, predominance of bile; if pale, deficiency of bile.

*Spontaneous discharge* should be distinguished from *involuntary discharge*, the former being of little importance, and being a common result of unconsciousness (when relaxation is present) and occurring, also, owing to the excremental matter being completely liquefied.

*Involuntary evacuations*, properly so called, and attendant upon the last stage of severe fevers, especially fevers of a typhoid character, are indicative of paralysis, and are to be looked upon with great apprehension.

*Diminished evacuations* are not necessarily opposed to the lessened consistency, and may occur either with highly consistent or very liquid motions; in the latter case, however, they generally exhibit an *imperfect* expulsion of the matter to be evacuated, and, in such instances, of the presence of some irritative substances in the canal. If unqualified by any other manifestation (such as hardness, or those already stated) and especially if there be a constriction of the passage, the *decreased quantity* of the evacuation may be attributed to spasm.

*Straining to evacuate*, is sometimes of spasmodic character, especially if the motion be only partial, very scanty, or totally suppressed. But without spasm, or especially nervous character, such straining may result from a greater or less degree of inflammation and its sequels, or from the peculiar susceptibility of the canal to irritations.

Of *painful evacuation* we shall have occasion to speak under the head of 'Pains.'

## 2. FLATULENCY—WIND IN THE STOMACH AND INTESTINES—AND ITS INDICATIONS.

The generation of wind either in the stomach or in the bowels, arises from the production of the elements, in the form of gases of the normal phlegm which is secreted from the blood. If *habitual* and excessive, it is clearly indicative of weakness or derangement (of nervous action or tone) in the *stomach*, if the wind be expelled *upwards*,—or in the bowels, if the intestines become inflated, or the wind be expelled *downwards*.

Flatulent distension of the belly, occurring in children, often identifies an additional morbid state, characterized by the presence of worms in the intestinal canal.

Flatulent, drum-like distension of the belly during the course of FEVER, betrays want of vigor which may occasion serious results. If, at the same time, the belly thus distended be very tender, and severe pain be caused by pressure, a tendency to local inflammation is clearly exhibited.

### 3. NAUSEA AND VOMITING, AND THEIR INDICATIONS.

1. These symptoms especially point out either original, local, or sympathetic affections of the STOMACH, or superior portion of the digestive apparatus, as opposed to the bowels or intestinal canal, which constitute the second division of this portion of the system. If, therefore, these symptoms be *simultaneous* with unhealthy evacuations, it is to be deduced that both the stomach and bowels are affected either simultaneously or sympathetically, or by communication of the irritability from the one to the other.

But they may be occasioned by mere sympathy, without any actual local affection, as:—1, by sympathy with the WOMB in females, and indicative of the earliest stage of pregnancy; or, 2, by sympathy with the LIVER, as evinced by the pain or other symptoms emanating from that organ; or, 3, by sympathy with the BRAIN, as the result of irritation, or of oppression occasioned by determination of blood, concussion or water; or, 4, by sympathy with the INTESTINES, as particularly evinced by perverse and continued constipation. All these relations should be duly considered; and, in the absence of any such remote causes, we may trace the origin of these symptoms to the STOMACH itself, as:—

If *habitual*, 1, to an organic derangement of that and the neighboring portions of the system.

2. If both food and drink are thrown up as soon as swallowed, to inflammation.

3. If accompanied with foulness or enlargement of the tongue, and evinced in the state of the matter thrown up, especially if the suffering be immediately relieved after vomiting, to the presence of obnoxious and indigestible substances in the stomach.

4. If attended with sudden paroxysms of cramp-like pain, and abrupt suspension of breath, to increased irritability of a purely spasmodic character.

5. If both symptoms occur *habitually* in the morning, and there be no further indication of irritation of the stomach itself, and if further examination of the urine, and other symptoms lead to the same conclusion, they may be attributable to *gravel*.

### 4. THE APPETITE, AND ITS INDICATIONS.

The appetite may be equally great, or greater, in disease than in health, but there are very distinct indications which distinguish these opposite conditions. The appetite of health should be even, regular, (not capricious or fitful) varying in the frequency of its return only according to the habitual periods of meals; but, if not governed by any habit calculated to modify the intervals between the returns of hunger, it should recur, in the adult, about every four to five hours, and in infants and children at intervals of from one to three hours; and satiation (that is, the meal), should *not* be accompanied with *flushing of heat*, but rather with a sensation of chilliness. As an indication of disease we find the appetite deficient, or absent,—excessive and irregular—fitful—capricious—craving after particular substances, with absolute repugnance to others—characterized by a desire for unnatural things, as chalk—or by a particular long-



ing for stimulants, etc., in the majority of which cases the stomach is the seat of derangement, but occasionally, also the bowels (as when worms are present in the intestinal canal); except as regards suspension of appetite, which, in most cases (particularly if supplanted by thirst), indicates constitutional irritation (FEVER), whatever be the original seat of the affection. In other instances, we may remark an habitually excessive or craving hunger (not *necessarily* either capricious or fitful), but particularly qualified if *flushing of heat*, or peculiar *heat of the hands follow a meal* when we may have reason to apprehend a hectic or consumptive disposition. In some cases, however, in which excess of appetite occurs (unaccompanied with these qualifying conditions) especially in young persons, it may be attributed to worms alone—to over-rapid growth—to violent exercise and excessive transpiration, or to any other cause which would tend to absorb or to consume the substance and nutriment of the body.

*Absence of appetite* may more particularly be attributed:

1. To organic derangement of the stomach or simply to weakness of the first process of digestion.
2. And more frequently, to the overcharge of the stomach, or the pressure of injurious and indigestible substances, even in moderate or small quantities.
3. To FEVER of any kind, otherwise determinable by the *pulse*, etc., except, indeed, to hectic or rheumatic fever, neither of which necessarily subdue the appetite.
4. To nervous, hysterical, and hypochondriacal conditions—or to nervous derangement resulting from emotions, as from excessive grief, alarm, etc.; or to the like, resulting (without fever) from undue physical exertion (a rare case) when the *nerves* of the stomach are implicated; or frequently from undue MENTAL LABOR or anxiety.

*Natural appetite*, that is, appetite neither increased nor decreased, may occur, associated with hectic or rheumatic fever; when, however, it is generally qualified by other circumstances:—in both cases it is more likely to be irregular or excessive.

*Excess of appetite*, as a symptom of disease, is an evidence of poorness of blood, frequently attended with the secretion of an acrid, irritating phlegm; but, without such conditions, it may result from purely nervous and sympathetic irritability—as during pregnancy, or in diseases of a purely hysterical character;—or again, from some habitual cause of irritation, such as worms. In hectic or consumptive complaints it indicates the insufficient distribution of nutriment by the tributary apparatus, that is, a want of proper action in the digestive function to appropriate the nutritive constituent of the food. Excess of appetite will also often appear associated with *habitual vomiting*, or continued relaxation of the bowels, owing to the deficient distribution of nourishment.

##### 5. THIRST AND ITS INDICATIONS.

In the majority of cases, continued thirst indicates FEVER or inflammation; but, inasmuch as it will result from any dryness of the mouth and throat, and from lack of moisture in the stomach (without disease), we must be careful to distinguish the thirst of health.



The thirst of health may be the consequence of any condition calculated to absorb the moisture of the month, throat, gullet, and stomach—such as.—severe physical exertion, greatly elevated temperature, particularly in a dry state of the atmosphere, or even when the temperature is much depressed by the deficiency of moisture in the air, particularly if strong exercise be taken during the prevalence of such atmospheric conditions;—or, again, eating salt food, or eating solid food, especially heating food (chiefly animal) in excess, or continuing too long without food (without necessary abatement of appetite) after the return of hunger, whereby the saliva has been exhausted, etc.

When, however, there is no apparent cause for the thirst, especially if accompanied with increased heat or dryness of the skin, etc., and if, upon investigation of other symptoms, further indications should warrant the conclusion, we may infer that the thirst arises from internal heat, and is consequently a symptom of FEVER. If in such a case the thirst be *intense* and *insatiable* (the pulse being full, hard, and frequent), the character of the FEVER is distinctly indicated—it is *inflammatory*; that is, there is a deficiency of the watery constituent in the blood.

Thirst may, however, arise purely from acidity; when it will be characterized by the risings and acrid sensations in the gullet, etc.

It may also be associated with spasm; when, however, it will be characterized by *deficiency*, not by excess of heat.

#### THE TONGUE, AND ITS INDICATIONS.

The tongue affords many of the most important indications associated with derangement of the DIGESTIVE functions.

*Tongue thickly furred*, dirty white, or brownish white, without either unusual dryness, enlargement or redness, indicates that the derangement involves rather the lining membranes than the nerves of the stomach, and that *not* to a serious extent. The derangement is then identified as comparatively recent, and easily remediable.

*Tongue furred* with slimy matter, and with *vivid red* tip and margins, indicates also an affection of the lining membrane, but one of a more serious and continuous character.

*Yellow tongue*, also qualified by one or more of the last-stated conditions, indicates the *liver*, etc., as implicated.

*Clean tongue*, of bright redness, naturally moist, but with the papillæ unnaturally prominent, indicates that the derangement affects the nerves of the stomach, and is of recent date.

*Dry, red, glazed tongue* represents a similar affection to the last, but more severe, and of longer standing.

*Swollen*, red tongue, but slightly charged with white fur, represents such a degree of nervous derangement of the digestive organs as to react congestively upon the brain, and implicate that organ.

*Cracked, furrowed, fissured, swollen tongue*, conveys to our apprehension the most severe degree of derangement of the nerves of the stomach.

*Swollen tongue*, thinly coated, white but bright red at the tip and margins, indicates a complication of both varieties of indigestion—viz.,

that of the lining membranes, and that of the nerves of the stomach, which is of old standing, and of an obstinate character. We may look for irregular operation of the brain, as associated with this symptom, as well as extreme despondency, nervous irritability, and depression of spirits and activity.

*Tongue indented on either side* is a modification of the swollen tongue, already mentioned as associated with derangement of the nerves of the stomach, and consists of a very severe degree of tumefaction.

*Tremulous tongue*, or tongue trembling when protruded, is often distinguished amongst habitual drunkards, and distinctly indicates a complex variety of the *nervous* form of indigestion, implicating the spinal marrow.

*Blackish, dry, furred, and tremulous tongue*, is a symptom in abdominal or putrid typhus.

### THE NERVES, BRAIN, SENSATIONS, AND SENSES, AND THEIR INDICATIONS.

This section includes the consideration of suspension, or acuteness of sensation, perception, consciousness, volition, motion, rest, etc.

#### 1. LOSS OF CONSCIOUSNESS, DELIRIUM, FAINTING, ETC., AND THEIR INDICATIONS.

Loss of consciousness may be of three kinds (as we shall have occasion to consider it), two of which are primarily referable to the brain, and one to the heart, namely: Apoplexy (considered as a symptom), which consists in total *suspension* of the activity of the brain, and consequently also of nervous irritability and vitality; Delirium, which consists in disturbance or irregularity in the activity of the brain; and Fainting, which consists of temporary suspension of the activity of the heart, but which also involves the like prostration of general nervous activity.

APOPLEXY, which is distinguishable by unaltered strength, or by increased strength of pulsation, accompanying *total suspension* of motion, or motive power (which does not always return with consciousness), indicates an organic affection of the substance of the brain more or less critical.

DELIRIUM, which is distinguishable by loss of consciousness or more properly, perhaps, of connected ideas (generally of the nature of sleep, without rest), with or without frantic movements, but always with increased or diminished activity of the brain of an irregular nature, affords various indications, according to the particular conditions and circumstances which precede, accompany, or follow it, or to the particular disposition of the patient, which may serve to qualify it.

1. When it becomes continuous, and is divested of any other symptom of derangement, and the functions of the system continue in regular operation, it ceases to be a *symptom*, assumes the individual character of an independent disease, and would seem to indicate a greater or less alteration of the substance of the brain.

2. When there is a continual<sup>1</sup> predisposition to the return of attacks of delirium, without a permanent and continual duration, qualified, moreover, by other symptoms of hysterical or hypochondriacal susceptibility, it is of comparatively little importance as a *symptom* of diseases which exhibit that character (hysterical, etc).

3. Persons of a habit of body and temperament, characterized by a peculiar activity, susceptibility, and excitement (easily provoked or aggravated) of the brain, so invariably exhibit this symptom with the least acceleration of circulation, and are so prone to become wholly abstracted by the continued activity of the organ in question, that we should weigh well the accompanying indications, which further characterize disease, before attaching much importance to delirium *alone*, in patients of such a disposition.

4. If, however, there be *active delirium*—that is raving, occasioned by sudden determination of blood to the brain, with or without frantic action, with considerable derangement of the system, as evinced by other symptoms, especially if this symptom occur in persons who are not subject to a manifestation of the kind, we should first consider—whether there be continuous and active FEVER, in which case we have an indication of the most inflammatory disposition of disease, and it remains to be considered whether the brain itself, or its membranes be the primary seat of inflammation,—or whether there has previously been some cutaneous eruption or efflorescence, which has suddenly disappeared, or whether there are such symptoms as forebode an eruption; or whether, again, there have been evidences of inflammation, developed in some other organ, which suddenly subsided or disappeared. Or, if no such manifestations be present, we may consider the delirium as resulting from a sympathetic affection of the brain, of which the primary cause is seated in some other part,—such as the stomach or the bowels, or both, arising from the presence of irritative matters (as, for instance, worms, bile, etc.); or, again,—if any such cause can be identified,—the influence of narcotic and poisonous drugs, etc.

5. There is also another kind of delirium which appears as a very important symptom, especially associated with any cause of pressure on the brain, generally the immediate or remote result of—

*Inflammation*.:—Immediate, when it appears as a concomitant symptom of the actual disease,—in which case it distinctly indicates the presence of blood disengaged, and accumulating in the *substance of the brain*, or suffusion of extravasated blood in the enveloping membrane;—Remote, when acute organic inflammation is not present, in which case it identifies the presence of water.

This is what is termed *drowsy delirium*. It is identified by a *deficiency* of nervous and cerebral activity, the absence, even (in many cases), of any motion of the body, a species of dull, inanimate sleep, total helplessness, and complete silence, or, at the most, a low internal murmur; and it is characterized by prostration of nervous action.

*Drowsy delirium*, moreover, may appear in nervous and typhoid FEVERS, as an indication of general debility.

In any case it may be considered as a more critical manifestation, than *active delirium*.

FAINTING,—*swooning*, should also be considered with due regard to the disposition of the patient, and to the circumstances which qualify it.

1. If it be *habitual*, especially as the termination of violent attacks of palpitation of the heart, which generally, if not invariably, lead to this issue, there is reason to apprehend organic derangement of the heart.

2. If, on the other hand, it should occur casually, after violent emotion—as joy, fear, grief, etc., or after severe loss of blood, etc., or as the result of casual, but very excruciating pain, or as the consequence of an accidental injury of no great moment, it is not to be looked upon as a very important symptom.

3. If, again, it be the habitual result of mere nervous excitement in persons of a highly susceptible hysterical or hypochondriacal disposition,—in which case it is merely spasmodic,—it is not of great moment.

4. If, however, one or more fainting fits should usher in an attack of FEVER, we have a positive indication of the subsequent nervous type of the disease.

## 2. MOTION OR MUSCULAR ACTION, REST—AND THEIR INDICATIONS.

Although not in accordance with technical classification, we shall include under this head of “motion and rest,” every circumstance, internal as well as external, in which the motary power is called into play, or subdued. Wherefore, it must be premised, that motion and rest are either healthy and natural, or symptomatic of derangement, and consequently unnatural.

And, *first*, with respect to motion:—it is clear that to be healthy and natural, it must be subject to the WILL, and the consciousness; that is, that until the resolution to effect a certain movement (as of the arm or leg) instinctively calls the proper muscle into play, that muscle should remain *inactive* (but *not* incapable of action). It is also clear that it should not *exceed* the limit prescribed by the WILL (except in so far as the physical impulse prevents an abrupt arrest—as, for instance, if running at great speed, the runner should be unable to stop himself suddenly, when at the top of his speed upon the *sudden* intervention of circumstances requiring it. It is further evidently clear, that even if the WILL, excited by sensations (which are painful), does prompt motion—such as change of position—such motion is not to be considered as a *healthy* movement properly so called. An apposite instance of this occurs in any restlessness caused by suffering. With respect to motion, which occurs when nature in health would have prescribed rest—as in the case of restlessness at night,—this is evidently a case in which the motion is *not* subject to the will, and therefore unhealthy and unnatural; because sleep is totally independent of volition. The active and motary condition of health, as the general rule for an adult male, should not continue (*in spite* of the WILL) more than from sixteen to eighteen hours out of the twenty-four. In the earliest days of infancy, it should occur during little more than the time required for feeding. Young persons



under twelve or fourteen years of age, should have a natural tendency to activity during about fourteen to sixteen hours out of the twenty-four.

*Secondly*, with respect to rest:—if understood purely in the sense of muscular inactivity, during the active and conscious operation of the WILL, it is also clear, that in order to be truly denominated as *healthy* and *natural*, it must, likewise, be subject to the WILL, which has the power of determining its duration, and of prescribing its recommencement at any moment. Even if prompted or disturbed by the *sensations*, the WILL is yet, to a certain extent, the mediating power. As sleep is not purely a degree of muscular inactivity (which it does not even necessarily induce) it is totally exceptional. But, even here, if the WILL be retained in proper ascendancy, by being habitually exerted, it is well known that it has the power of determining the duration of sleep; for many persons can wake precisely at a given moment after many hours' sleep, merely by having previously *resolved* to wake at such a moment. It is even admissible, that the WILL has an initiating power in inducing sleep, because sleep would not in many cases occur, without a resolution to *permit* it; and, if it occurs *in spite* of the WILL, it is exceptional, because it must either be an unhealthy symptom in itself, or the absence of it must have been an excess of exertion forced upon nature by the WILL. That sleep can be induced even with a disposition to rest—by a *mere* resolution of the will—has been asserted, but is far more problematical. If, however, it does not occur when the WILL composes the body for it, it is again exceptional and the absence of it is a symptom of *derangement* (*not healthy*). It can not, nevertheless, be denied that the WILL cannot coerce it; and if the WILL, which is refinement of nervous power, combat the irritation and irritability which repels sleep, it becomes a mere combat between one portion of the nervous system and another (resulting perhaps in fever), both become more and more irritated, and each repels the other more violently. Thus the very thought that one cannot sleep, and the wish to do so, makes one more restless.

The sleep of persons of all ages should be calm, neither interrupted, nor of too long duration, undisturbed, evincing a placid countenance and no evidence of pain, uneasiness, or fantastic dreams and visions. The only motion which does not identify irregularity during sleep, is the occasional turn from side to side. The more noiseless the breathing, the more perfectly healthy the sleep. The skin during sleep should be warm, but neither very hot, dry, nor *excessively* moist.

RESTLESSNESS, therefore—that is, doubly, the inability to rest, in spite of the will, and the muscular motion prompted by the will (under such conditions), may be considered as an unhealthy and unnatural condition of activity or motion (either internal or external). As a symptom of FEVER, it identifies an excessive susceptibility or irregularity, and irritative activity of *sensation*. It is a symptom rather of an inflammatory than of a debilitated state.

*Contraction of the extremities* towards the belly, identifies pain in those parts (chiefly *colicky* pains).



*Continual starting up in bed*, indicates great oppression and anxiety, or simply delirium.

*Continual sinking down towards the foot of the bed*, denotes great prostration of vital energy.

*Throwing off the clothes*—when the patient lays himself bare, denotes excessive oppression and anxiety, or simply active delirium, which may likewise be identified by evident inability on the part of the patient to bear the bed-clothes upon the body, or when they seem to oppress him like heavy weights.

*Grasping at imaginary objects*, may be considered as one of the most severe indications of utter failure of vital energy, if not of approaching dissolution.

POSITION OF THE PATIENT—a question which is distinctly dependent upon the questions of motion and rest, and which evinces some very important manifestations—as, for instance :

1. Severe suffering, provoked by lying on one side, which constitutes inability to lie on that side, generally denotes internal derangement of organs, whose seat is in the *opposite side*.

2. Immoveable retention of one position, identifies either excessive weakness or stupor, according to the associated symptoms, and the previous duration or nature of the disease.

*Repeated change of position*—in some measure distinct from what has been more generally described as restlessness—if occurring on what are termed the “critical days” (as the seventh or fourteenth), or anticipated periods of determinative issue, in FEVERS which run a regular course, (especially eruptive fevers), may be assumed to indicate the approach of the crisis ; or, if occurring early in, or during, the course of a fever, which has not been accompanied by an eruption, we may infer the necessity for such a developement ; or, again, if unattended with the general indications of a forthcoming eruption, or unconnected with any period of crisis, and characterized either by determination of blood to important organs, or by deficiency or suspension of natural discharges or evacuations, this symptom may variously indicate the lodgment of oppressive matters in the stomach, or simply internal pain, or anxiety.

4. *The favorable indications* connected with the position, consist of such a position as is least inconsistent with that usually assumed by the patient when in health, and ability of the patient equally to lie on one side or the other, or upon the back, which is decisive in determining the absence of disease of the organs of the chest (especially if, moreover, the breath is not impeded or oppressed, when the head is bent backwards), or of the intestines.

SLEEP, when unhealthy, is distinguishable by any circumstance contrary to those above stated, or opposed to the habitual condition of the patient (in health).

1. Or, again, when it is characterized by delirium, under the head of which the particular indications afforded by this symptom will be found.

2. When it is impossible to rouse the patient; in which case fever being present, it is identified as of a typhoid character, or we may otherwise infer that there is an inflammation of the brain. This is especially an ill omen when it is manifested at the *commencement* of the fever.

3. When the sleep is disturbed by the least noise, but relapses immediately.

4. When it is interrupted by muscular twitches, convulsive movements, and repeated starting, or when there is grinding of the teeth during sleep, all of which occur associated with a high degree of hysterical excitement in females, when they are not *serious* evidences of disease, but which may occur in consequence of sympathetic irritation, resulting from oppression or irritation of the stomach.

SPASMS and CONVULSIONS should, according to our purpose, be classified under the head of *motion*. Indeed they constitute muscular motion, both internal and external; but in order justly to discriminate their symptomatic importance, we must have due regard to the general circumstances, age, sex, disposition, etc., which may qualify them, for :

1. As occurring in females of a highly susceptible or hysterical disposition, or in children, they are usually provoked by such trivial causes (often unattended with such constitutional disturbance), that they are commonly not to be considered as of great moment, and may generally be traced to some source of irritation of the bowels.

2. If, however, they occur in consequence of wounds, by which important tendons have been seriously injured, spasms may be considered as highly momentous, and may result in lock-jaw, or, at all events, in permanent rigidity of the parts injured, or of other parts.

3. If again, they should occur (in persons of mature years, and of robust habit), as resulting from severe loss of blood, etc., they are of portentous import. In this case they are the result of exhaustion of the vital energy.

4. If, again, they appear as the effect produced by determination of blood to the brain or to the spinal marrow, or are derived from the presence of obnoxious matters or foreign bodies, they are not to be neglected. In the first of these cases, they are caused by super-abundance of blood, etc., in the second by nervous irritation.

5. If they occur at the point of issue in TYPHUS FEVER, they may either be critical, (terminating in *convalescence*), or fatal (when the vital energy sinks in this last effort).

6. If they appear associated with contagion, or the irregular development of eruptions or efflorescences, as with purple rash, smallpox, etc., they are attributable to nervous irritation.

7. They may be attributed to the presence of worms in the intestines, or to any other obnoxious or irritating matter, either in the stomach or intestines, in which case, also, they are directly occasioned by nervous irritation.

8. *Convulsions* resulting from the pressure of extraneous matter (such as water) on the brain, or otherwise traceable to irritation of the brain primarily, may result in the highest degree of which they are susceptible, namely EPILEPSY.

9. *Spasms*, particularly if caused by tendinous injuries, may terminate in the highest degree of which they are susceptible, namely, permanent rigidity, (such as lock-jaw or the contraction of any limb, or part of a limb.)

10. *Spasms* which affect the muscles of any limb are commonly called "*Cramp*." The distinctive feature of a spasm is gathered therefrom, namely, an *uninterrupted* muscular contraction.

11. *Convulsions*, consist in the alternate contraction and relaxation of one or more muscles.

12. *Spasms and Convulsions*, internally, include such affections as *vomiting*, already separately considered, (when they affect the stomach); *Colic*, exemplified under the head of "Pain," (when they affect the bowels), *Palpitation*, considered under the head of "Pulse," when they affect the heart); *Cough*, separately considered hereafter, and also under the head of "Breath," (when they affect the chest); *Retention of urine*, considered under the head of "Urine," (when they affect the bladder); Hiccup or Hiccough, separately considered, (when they affect the midriff.)

PARALYSIS,—which may be confined to muscular power, or which may extend to the superior faculties of the brain, and to all power of sensation and perception,—must be considered with due regard to every circumstance connected with it, in order to form a just idea of its indications. In any case, the brain must be considered as the seat whence this symptom, either directly or indirectly, springs. But it may either appear as the result of some external oppression, or from internal and organic affection of the brain and spinal marrow.

1. If it be purely occasioned by external causes, or by causes which are external as regards the *organic substance*, as for instance, if the oppression arise from confinement of an enveloping membrane, it will be easily distinguishable by being transitory, and consequently the more simple remediable. In the majority of such cases the paralysis will be local, leaving the superior faculties, and all *other* physical parts of the organism, unaffected. Very severe cases hold as an exception.

2. If it be the result of internal affection of the organic substance, as of disengaged accumulation of blood in the substance of the brain, it will be continuous, and will almost invariably impair, if not destroy, the memory, and permanently detract from the powers of perception and sensation

HICCUP OR HICCOUGH,—an internal development of muscular action,—must also be considered with due regard to the conditions and circumstances of age, and of the symptoms with which it is associated. Simply described, it is a convulsion affecting the midriff.

1. If it occurs in children, and can be associated with cold, or with distension of the stomach, (that is, flatulency), it is casual and of little moment.

2. If however, it should be associated with nervous FEVER it indicates a malignant type.

3. If associated with inflammatory FEVER, it identifies, to a certain degree, the tendency to inflammation of the bowels.

TREMBLING is a symptom which is of various import, according to the circumstances and conditions under which it appears, and according to the disposition of the patient.

1. For if the patient be of the highly nervous susceptibility, and it cannot be traced to any of the other causes mentioned, it may be attributed to a degree of nervous excitement or irritation, which may result from emotions of any kind,—abuse of stimulants, whether medicinally administered (under foolish treatment) or not, or to excess of physical exertion, but more frequently of mental labor.

2. If the antecedent circumstances be characterized by loss of blood, or any animal fluid, it may unquestionably be attributed to debility, as also if it attend every attempt at exertion after severe acute disease.

3. If it be distinctly manifested, as unconnected with other direct causes at the outset of a FEVER, here is an unquestionable premonition of the subsequent nervous character of the disease.

4. If it should appear in a person of a full habit of body, or otherwise, with evident distension of the bowels, and unconnected with any other apparent cause, it may with propriety be attributed to superabundance of blood in the vessels.

#### I. THE SENSATIONS, AND THEIR INDICATIONS.

The sensations need not necessarily be painful to afford a distinctive symptomatic indication, although it be true that, as an index of disease, every particular or characteristic sensation is generally painful, or at all events disagreeable. The most distinct sensation as a symptom of disease, however, is PAIN, or the *painful* operation of a function,—or *absence of pain* when there is disease which should cause pain; but we may also divide these sensations into two further distinctive subdivisions, namely, sensations of *discomfort* or uneasiness, and sensations of *anxiety*.

##### PAIN, ETC., DISCOMFORT AND ANXIETY, AND THEIR INDICATIONS.

*Pain*, as a distinguishing symptom, in whatever part or organ it may have its seat, is to be divided into (1) that which continues uninterruptedly, which if persistently in the *same part or parts*, and continues to become aggravated (until resolution takes place), and which is further qualified by being aggravated by the touch, and *still more by severe pressure* and *temporarily* by the application of heat, which is the general distinctive indication of INFLAMMATION of the part or parts whence the pain originates: (2) *Pain* which is chiefly developed in a particular course or direction, (the course or direction of a nerve,) or which is changeable as to the part in which it occurs, but which, in either case, is generally characterized by aggravation from *apparent* contact or *slight touch*, and relieved, or not aggravated, by severe pressure, conditions which variously identify pain of a nervous character: and (3) Pain which comes and goes in the *same part or parts*, partakes of a contractive or cramp-like character, is *relieved by pressure*, or *warmth*, or *friction*, is often intermittent and always irregular, and which is rarely *continuous* and *never persistently* continuing to become aggravated, conditions which identify pain of a SPASMODIC character, that is, SPASM of the part or parts affected.



1. *Pain in the chest*, or painful respiration, may be the result of an overloaded stomach and impeded digestion, or may be occasioned either by a *rheumatic*, by a *spasmodic*, by an *inflammatory* affection, or by occasional determination of blood to the part of the enveloping membrane of the lungs, etc.

If it communicate a sensation of being bruised, or of a stiffness, as if the muscles could not bear the expansion of the chest; and again, if the pain is of a shifting character, or if touching and pressing the chest causes pain, it may be identified as of a rheumatic character.

If it be *casual stitching*, as, for instance, suddenly interrupting the respiration, without returning regularly, or being regularly provoked by a similar effort in breathing, it may be considered as of a neuralgic character.

If there be *persistent stitching pain*, *whenever* a certain degree of expansion takes place, with a dull, heavy pain, (without *progressive aggravation*) in the *intervals* between such expansion, we may identify determination of blood to the enveloping membranes of the lungs.

If, again, there be a continual acute pain, growing progressively worse and worse, and further qualified by a general and severe degree of fever, which has been preceded by chills, and is associated with more or less prostration of strength, inflammation of the membranes in question is clearly identified.

2. Pain in the bowels, or painful evacuation, is either of (1) a *NERVOUS* character, when it will be fugitive, returning when the attention of the patient is directed to it, fugitive and aggravated by apparent contact or by slight touch, and relieved by severe pressure; or, (2) *spasmodic*, (a modification of the nervous,) but relieved by contact and pressure of every kind, by lying on the belly, and by drawing the legs up, and otherwise contracting the body, which may, by continuance, become inflammatory; or (3) *inflammatory*, when it will be readily distinguished by persistency, accurate locality, progressive aggravation, and by excessive tenderness of touch, and still more of pressure, etc.

Colic, properly so called, is, strictly speaking, a *spasmodic* pain, but by long continuance may become inflammatory.

3. *Painful discharge of urine* may appear as the symptom either of inflammation or irritability of the passage, or of the bladder or neck of the bladder, distinguishable by the locality of the pain and the nature of the discharge; for (1) if the pain arise from inflammation of the bladder, or neck of the bladder, it will be associated with fever and hard pulse, and the pain most severely felt at the bottom of the belly, and the discharge will usually be either mingled with blood, or blood will predominate over the urine, or the discharge of urine will be followed by that of pure blood, with excruciating, twinging pain; (2) if the pain be occasioned by inflammation, irritation, or irritability of the passage, it will be qualified by a scalding sensation (when urinating) towards the terminal part of the passage, with or without discharge of matter; (3) if the pain be dependent upon inflammation, irritation, or irritability of the *kidneys*, the water evacuated will be *hot*, and the seat of pain will be



chiefly in the loins and small of the back; or, (4) if the pain be occasioned by spasm of the bladder, or neck of the bladder, there will be continual *urging* to pass water, but total inability to effect it; that is suspension of urine, with cutting, cramp-like, agonizing pain in the part, relieved, however, by pressure; that is, by doubling the body forward, and pressing the hands firmly upon the lower part of the belly.

4. *Absence* or sudden suspension of pain, in severe cases of organic inflammation, is, in all instances, a most ominous manifestation, but it may indicate two distinct conditions, namely, (1) the sudden transition of the inflammation to another organ, (in most cases to the brain,) when it requires the utmost care, but is, nevertheless, not so alarming as when such reappearance of the disease in another quarter does not quickly follow; for, in this case, the change, in the majority of cases, has been one from inflammation to mortification, (and consequent loss of sensation.)

5. *Intermittent pain*, which is also either periodical or irregular, or that which is very severe for a certain period, often accompanied by *local* heat or general flushes of heat, sometimes by the palpitation of the heart, and frequently by a degree of irritative fever during its continuance, and terminating with local or general sweat (and that only), and by an acute degree of nervous susceptibility and irritability, often aggravated by heat, or by slight contact, (the patient having, however, an inclination to press severely upon the part), but which *totally* subsides during regular or irregular intervals, and which is of a *NERVOUS* character.

6. *Remittent pain*, or that which becomes modified from time to time for certain intervals, especially at certain periods of the day, or under particular conditions of heat, cold, access or exclusion of air, or owing to palliative measures, but which never *totally* subsides during the intervals, but continues dull, heavy, and persistent, instead of being highly acute, pulsating, or shooting, and which is further qualified by severe *feverish* symptoms during the *acute* stages, which, however, also become modified though never wholly subdued, during the intervals of comparative relief. This description of pain is generally associated with organic inflammations or with *obstructive* causes of irritation, with a strong tendency to organic inflammation, and identifies a tendency to chronic or continued inflammatory action in such parts or organs.

7. *Inflammatory pain*, in its genuine distinctive character, is very plainly distinguishable from pain of any other nature, as, for instance:

It is ever accompanied with increased heat of the particular part affected (if purely *local*), and *then even* in some cases, especially, if it be of long continuance, by general increased heat of the body, or alternate heat and chills, frequent and hard pulse, and other signs of fever.

And if it be interual, and affecting one or more of the important organs, the adjacent parts, as also the whole body (except the lower extremities), will manifest greatly increased heat, and the general symptoms of fever will run high, the thirst being generally considerable, and often intense and insatiable, (in highly inflammatory subjects).

It will be continuous, proceeding from bad to worse, until the crisis or other issue.

It will be *relieved* by moisture of the skin, and general or even local perspiration.

It will be greatly aggravated by pressure, or even by the least touch, as of the clothes or bed clothes, but still *more* so by severe pressure, which is usually insupportable.

If local, there will be redness and often swelling of the parts; if affecting the outer membranes, particularly of the intestines, again, redness will often be discernible externally.

There will be sometimes more or less strong development of the adjacent vessels, which will be observed to be swollen and dark, their course being palpable, where in general they are externally imperceptible.

There will be often more or less throbbing or pulsation in the part with the pain, especially in the after or suppurative stage, (although this symptom may also accompany *nervous* pain.)

If local, it will usually be much *aggravated* immediately by *warm* applications, such as fomentations, but will afterwards decrease, and it will be generally *relieved* as first by *cold* applications, but in such cases the pain will often return more severely, as soon as the cold application is removed.

Whether local or affecting internal and important organs, it will be aggravated by stimulants, motion, exertion, mental or nervous excitement, fatigue, etc., and will have a tendency to grow worse towards night.

If natural discharges have occasion to pass over the inflamed surfaces, as, for instance, of the bladder or bowels, the pain will usually become excruciating.

If internal, the natural discharges will be qualified by the evacuation of blood, and either by being very liquid (of the excrements), or very dry; in any case (of all discharges) they will be deficient in quantity, occur frequently, and there will be continued urging to discharge,

The external surface, whether attending local or internal inflammatory pain, will invariably be *dry* until the *CRISIS*, when the pain will subside, with the development of moisture.

The pain will insuperably prevent or disturb proper rest, (sleep; a condition which *only* applies to *inflammatory pain*, because pains, either of a nervous or spasmodic character, may be overcome by sleep, which frequently occurs in spite of them, especially of the latter). Consequently extreme and insuperable restlessness, with such indications as above stated, identifies pain as inflammatory.

The most perfect *CRISIS*, or resolution of inflammatory pains of any kind, consists in gentle, undisturbed, and placid sleep, with proper moisture of the skin.

8. *Nervous pains* are of a fugitive, irregular or periodical, pulsating, dragging, darting character, with or without local heat during the entire continuance of local suffering, but then often attended with local sweat (simultaneously—which never occurs of inflammatory pain), flushes of

heat without FEVER or with temporary irritative fever (in modified degree) restlessness, depression of spirits, hysterical disposition, or fantastic ideas, aggravated by thinking of them, and relieved when the attention is distracted by objects of interest, or aggravated by apparent contact, or slight touch, and relieved by pressure, unattended with any variations of appetite or thirst; characterized by the occurrence of involuntary motions, as by jerking, or the sensation of twittering (vibrating) in particular parts, in the latter case, frequently without external perceptibility of such action—by extreme restlessness and uneasiness, with or without a degree of irritative fever (and often with a peculiarly low pulse), by intermittency or periodicity, by being usually dispelled during motion, or absorbing occupation, and by a peculiarly intractable persistency continuing to recur, in spite of every resource, (when they cannot be traced to a precise point or cause), without, however, affecting the general health, or detracting from the vigor of the functions.

9. *Spasmodic pains* are of a cramp-like, contractive, and very severe cutting character, but they are usually of brief *duration*, though they may be of frequent *recurrence*. In their distinctive and peculiar qualifications they are totally unassociated with heat, or any other inflammatory symptom, and are rather, except in highly excitable subjects, habitually attended with depressed than over-active circulation; but by long *continuance* they will frequently engender a reactionary inflammation, and assume all the characteristic features of inflammatory pain, sometimes becoming, in such cases, very severe and intractable. As affecting important organs, they may *first* accelerate, *then* temporarily suspend the circulation and breath. In their distinctive character they are relieved by stimulants, heat, contraction of the parts, or of the whole body (doubling up), pressure, and especially friction. In their excess they render expansion of the parts impossible. They are either local, affecting particular motory muscles, or they are internal, affecting the muscles which are connected with or constitute important organs. A constant and severe degree of *spasmodic pain*, affecting important organs (as, for instance, the heart or stomach), is indicative of organic derangement. A casual *spasmodic pain*, however severe, is attributable chiefly to the accidental presence of irritative matters, especially in the stomach or bowels.

10. *Partial pain* in the head, that is, if developed in *one spot*, or on *one side* of the head, is indicative of hysterical (in the female), or if hypochondriacal condition (in the male).

11. *Pain in the back of the head* usually denotes determination of blood to the head.

12. *Pressing pain in the forehead*, accompanied with giddiness, commonly implies the presence of irritative or impure substances in the stomach; or, in some cases, excessive weakness:—that is, if it occur after a severe attack of illness, confinement to the bed, or more especially loss of blood, or other animal fluids.

13. *Pain*, particularly and persistently occurring in the back or loins, may (in females) be associated with pregnancy, or with a high degree of hysterical excitement, but in such cases as in the more *general* definition, it may be held to intimate the presence of, or a tendency to piles.

14. *Pain*, in the anterior part of the stomach, etc., *occasioned by pressure* (although there be no actual or positive pain without pressure), when occurring as associated with FEVER, or at the onset of FEVER, and further qualified by heat of the parts, and *retching* (if of the stomach), or *straining* (if of the bowels),—denotes respectively inflammation of such part or organ as thereby typifies the FEVER.

15. *Stitching, or prickling pain*, may denote a spasm, but more frequently determination of blood to a part,—or inflammation, especially of the enveloping membrane of an organic part.

If it be occasioned by spasm—as of the stomach—it will be *casual*, generally severe, sometimes even to the degree of suspending the breath, but passing off without return, or with a similarly *casual* return, in the majority of cases, upon the dislodgement of wind, especially belching; pressure and friction will relieve it.

If it be the result of determination of blood, such as when it occurs on the right or *left* side (about the spleen), provoked by rapid motion immediately after eating, or the like conditions,—or when it occurs without such immediate causes (as in the right side), and continues to be perceptible upon drawing a deep breath for some time without striking constitutional derangement,—pressure does not always aggravate it, unless severe, motion does: relaxation of the parts, as by bending the body forward, *relieves*.

If it be the decisive symptom of inflammation, as in pleurisy, we may thereby distinguish inflammation of the pleura (the membrane which covers the lungs, etc., and lines the cavity of the chest) from inflammation of the substance of the lungs, especially if there be little (if any) pain, until the parts are expanded, as by drawing breath deeply; and its inflammatory character will be distinguishable in the general derangement and high degree of FEVER which accompanies it, with local and general increase of heat (except sometimes of the extremities), dryness of the skin, thirst, etc.

SENSATIONS OF DISCOMFORT, such as the following:

1. *Restlessness* has been already mentioned under the head of Motion.

2. *Giddiness* (simply), except in the cases reserved as important, is a symptom of no great moment, but it often serves to determine the individuality of disease.

It may identify a nervous condition, generally speaking, occasioned by an irritation of the stomach, when we may identify the cause as an overloaded stomach, with a tendency to expel the irritating substances, *upward*.

In many cases, particularly as occurring in persons of a full habit of body, it denotes congestion of blood to the head.

3. In persons of advanced age, or of apoplectic tendency, it may be looked upon as one of the unpropitious indications of imminent apoplexy.

*Sensations of heat and cold* are of two kinds,—those (1) with which there is actual heat or coldness, and those (2) which merely convey these *sensations*, the parts affected with such feeling being neither hotter nor colder (necessarily) in a degree which should occasion such feeling. These are



subject to many modifying conditions—of which we shall briefly notice the most important—and are generally to be held as of very great importance in the investigation of disease.

*Actual increase of heat*, if unqualified by any particular local determination, or by particular and local pains, etc., denotes (1) increased activity of circulation, that is, FEVER (simply), more or less inflammatory, as the degree of heat is greater or less; (2) local inflammation, whether of particular parts, if purely local, or attended with general inflammatory action throughout the system, if the heat be general, and simply characterized by local determination and other particular identifying symptoms. This heat, as regards a particular spot, may or may not be externally apparent to another person,—it is sufficient that it is *internally* felt by the patient; (3) a dermination of blood to particular parts or organs, without active inflammation, when the heat, whether internal or external, is confined to the spot, part, or organ affected, and to those which are contiguous, (4) when inflammatory and general heat is present, it is identified by the simultaneous frequency, hardness and strength of the pulse, which *increase with the increase of heat*, and by its conveying *no unpleasant* sensation on contact to a healthy person; and further, by the part of the healthy body thus brought into contact with it becoming so accustomed to it, after a short duration of contact, as to lose the distinct sensation of greater heat in the sick body; or (5) in the last stage of putrid fever, or as an indication that fever has assumed a portentous putrid character, it may signify *incipient decomposition*, in which case, however, it will *increase as the pulse becomes more and more feeble*, it will convey a most disagreeable sensation of a burning, stinging character to the part of a healthy body on contact, becoming more and more disagreeable the longer the contact continues, and leaving the same unpleasant sensations for some time after the contact has ceased; this is a *chemical*, not an animal heat.

*Heat* in the anterior portions of the stomach, etc., and chest, and especially if conveying a burning sensation *internally*, to the patient, accompanying a high degree of fever, identifies, especially a general, inflammatory condition of the tributary organs of life.

*Heat of the hands*, after eating, denotes a disposition in the disease to become habitual, or if there be no distinct disease, a predisposition to hectic complaints.

*Fugitive heat* is particularly associated with a hysterical condition; it is, therefore, more common among females, (at certain periods especially), but it may occur in either sex, associated with nervous debility, irritability, or susceptibility.

*Coldness* of the extremities, associated with a severe degree of FEVER, denotes a high degree of inflammation in one or more of the important organs of life, such as may *impede* the thorough distribution of the blood throughout the system. Wherefore, it is one of the distinctive features of inflammation of the lungs, etc. But it may also denote *deficient* circulation or deficient strength of the blood, as associated with other symptoms of an enfeebled condition, and as such it identifies depression of



vital energy. Or, again, it may be the result of spasm, either of particular parts or of a superior organ (as of the heart in particular), if associated with other spasmodic symptoms.

*Numbness* or *deadness* of particular parts may (1) be indicative of latent and insidious gout, and if from other symptoms there be such further analogy as to identify this condition, it may be of much consequence; or (2) it may be purely nervous, and then quite superficial, in which case it will generally be palliated by *cold* applications; or (3) it may be occasioned by temporary arrest of circulation in the parts, in which case there will be no contraction or rigidity, and *hot* applications, friction, or rapid motion will palliate or remove it; or (4) it may be the result of spasm, in which case there will generally be contraction and rigidity, and heat or friction will likewise relieve, but *motion* will be, commonly, arrested.

*Itching* (without the presence of any eruption), especially if preceded by chill, and accompanied by heat (as associated with *FEVER*) usually announces the approach of a critical sweat; or if unattended with *fever*, commonly denotes an acrid condition of the humors.

*CHILL* (or the sensation of coldness without actual coldness), is a purely nervous indication of irregularity. It may consist of a spasm of the skin. The conditions which precede, accompany, and follow it, must indispensably be considered, in order to form a correct judgment of the various important indications which it affords, and which qualify every *FEVER*; as for instance:

1. Acute *FEVERS* are characterized by the single and unrepeatd occurrence of the chill. Intermittent *FEVERS* by the more or less frequent repetition of this symptom, according as the repetition of the fever fits return.

2. If the *FEVER* be of an intermittent character, and the chill be slight with great predominance of heat, there is reason to anticipate that the disease will run into a distinctly acute character; but if the chill be severe, of long duration, and very predominant, the occurrence of heat being imperfectly developed, the disease exhibits a tendency to become sluggish and of long duration, and to assume a chronic form.

3. Chill, which is very severe, and which *precedes* the heat, may first be generally designated as identifying either violent, acute, or even inflammatory fever, or, on the other hand, intermittent fever.

4. Chill, which is imperfect, or comparatively feebly developed, and which *alternates* with heat, (that is, is successively preceding and succeeding it), usually identifies, first: *FEVER* of a nervous character, or of a rheumatic, or, secondly, catarrhal description.

5. Chill (rigor, coldness attended with shivering), which occurs *during* the course of an acute *FEVER*, possesses many important significations; as, for instance: If there be inflammation of any particular and important organ, especially of the lungs, we may anticipate an issue into suppuration, or the still more urgent result of mortification, which will be further identified by subsidence of pain; or, in cases, particularly, in which no decided and local inflammation has existed, or in which the

general symptoms are favorable, the approach of the crisis is identified, namely, the thorough development of an eruption, or, more frequently, the occurrence of copious perspiration, followed by general abatement of the disease; or, when inflammation of one particular organ has existed, and any abrupt arrest has taken place, such as the irregular suppression of discharge, etc., we may anticipate a transition to other organs; if no inflammation of any particular organ has existed, and there be evident susceptibility of any particular part, or evident tendency to determination of blood to such part, or obstruction to the operation of its functions, we may anticipate inflammation of such part; or, if none of these circumstances be so combined as to warrant deductions, such as have been suggested, the chill may forebode the succession of intermittent FEVER.

**SENSATIONS OF ANXIETY:** a name which is applied to a certain feeling of weight or pressure, with oppression of the breath, of which the seat appears to be the anterior part of the stomach and chest. No pains (or very few) are so distressing as these sensations, in which there almost appears to be a struggle for life, although, except in cases of organic disease of the heart or lungs, or of inflammation of some important organ, or of general dropsy, etc., they are not so immediately urgent as they appear.

They may be the result of an accumulation of blood in the lungs, (congestion), in which case, if the patient were of a consumptive habit, the symptom would be urgent.

They may occur as a spasmodic affection of the lungs: or, again, from local derangement of the same organs, such as irregular reception and expulsion of the blood, owing, perhaps, to the obstruction occasioned by *enlargements*, (as of any important gland), *deposits of matter*, etc., in which last case, as distinguishable by the PULSE, etc., much importance should be attached to them.

Such sensations may be the result of merely sympathetic nervous irritation of the lungs, most frequently when the stomach is affected, as by deleterious drugs, tobacco, coffee, excess of fermented liquor, or obstructive and indigestible substances, in which case the affection must not be attributed to the lungs.

They may be occasioned, as last indirectly stated, by overcharging or overtaxing the powers of digestion, especially if the stomach be weak, a condition easily identified in those who have been treated with copious use of purgatives, emetics, or even tonics, or who have been addicted to excesses in eating or drinking, or in young persons affected with worms; in such cases, if the patient has partaken of flatulent substances, or of very rich, heavy, or irritating food, or of mixed liquors, or has been affected with bilious symptoms, the occasion of the *anxiety* is sufficiently apparent.

They may be associated with inflammation of the heart, stomach, liver, lungs, or bowels, or with dropsy of the belly, general dropsy of the system, or water on the chest; or, again, with permanent or organic disease of the heart or lungs, or with determination of blood to any of these organs, in the majority of which cases they are of great consequence.

They may be purely spasmodic, in which case the apparent suffering of the patient will be greater than in any other, and it is not uncommon, even without serious disturbance of pulse, to see the patient, as if in the last struggle of existence, either speechless and prostrate, or occasionally grasping at the bystanders, and feebly expressing an *apprehension of immediate death*. Such cases especially occur from comparatively slight causes of derangement (of the stomach in particular) in subjects of a highly hypochondriacal disposition, if males, or amongst females of excessive hysterical susceptibility, particularly if there be actually some affection of the womb. Women subject to frequent miscarriages are particularly subject to be affected in this manner. Under such circumstances, these symptoms are of comparatively slight importance.

## 2. THE ORGANS OF SENSE AND THEIR INDICATIONS.

This section involves, to a certain extent, not only the investigation of the condition of the sense, which may be deranged without apparent derangement of its organ, but also of the external manifestation of one organ itself (especially)—namely, of the *eye*, as well as of the *sight*. The other organs of sense—namely, the ears, nose, and palate, convey no such very distinct or important external manifestations, or none which are not included under various heads in the course of this article; and we shall, therefore, rest contented, in alluding to these, to treat of the senses which they convey—namely, *hearing*, *smell*, and *taste*.

The EYE affords a multitude of external evidences of derangement—as, for instance:

1. A *dilated pupil* may be engendered by sympathetic irritation of the brain, as associated with irritation of the stomach and bowels, particularly from the presence of worms; or it may indicate a local affection of the brain itself—as inflammation of the membranes—or water—and is then the result of *direct* pressure upon the brain; or, again, it may result from total inaction, or suspended action of the bowels, in which case the symptom would identify a sympathetic affection of the brain; or it may be associated with insensibility of the nerve, which communicates the representations of the eye to the brain, in which case it need not be otherwise than a *purely* local symptom.

2. A *contracted pupil* may be caused by great *tenderness of light*, when it consists of a convulsive effort to exclude the light from acting too powerfully upon the eye.

If attended with sensibility to light, it exhibits over-due irritability of the nerves connected with the sight, and consequently an irritative inflammatory tendency. If attended with insensibility to light and associated with FEVER, it is an indication of the utter prostration of the vital energy.

*Languid expression* of the eyes, occurring as a distinct and appreciable symptom, may indicate (1) if associated with *anxiety*—overloaded stomach, or sometimes the action of fermented liquor on the stomach, or of deleterious substances, or of heavy and indigestible food; in such cases it forebodes vomiting, especially if cold sweat transpire from the forehead; (2)

if associated with general debility as the result of sudden and severe loss of animal fluids, or of very severe acute disease, it denotes the sinking of the vital energy, and often forebodes fainting.

*Squinting or distorted sight*, is always symptomatic, when it is *not* habitual, and constitutes a very important indication in children, especially, and affords a decisive index to the case, when other symptoms conspire to evince the probability of acute water on the brain. Otherwise, it exhibits a sympathetic affection of the brain, originating in irritation of the stomach and bowels, especially, if worms be the direct cause of such irritation.

*Staring expression* of the eye, or fixed stare at one object, with or without raving, or muttering, if consciousness be absent, identifies delirium; or even if consciousness be not absent (in the usual acceptation of the phrase), there is a degree of abstraction amounting, to momentary and accidental suspension of consciousness, absorbed by a fixed thought, or with vacancy of thought, in which case also it may be termed the indication of a *degree* or *species* of delirium (in its strict sense).

*Sunken or retracted eyes* denote debility.

*Protruding or prominent eyes*, particularly if they be glittering, and characterized by suffusion of redness, combine to identify considerable congestion of blood in the head.

THE SIGHT is attended with some variations of distinctive importance—as, for instance:

1. Double sight, or half-sight, either of which may exhibit a degree of spasm, and which may be simply associated with a hypochondriacal or hysterical disposition, but which may also arise from irritation of the stomach, especially, as the result of very stimulating food or drink; in which case, however, it is usually characterized by giddiness, drowsiness, dread of motion, talkativeness or extreme taciturnity, or excessive restlessness, and excitement; or, again, as one of the premonitory symptoms of imminent apoplexy.

2. The appearance of a profusion of dark spots before the eyes, generally conveying the idea of a slow *descending* movement aggregately; but sometimes also of irregular oscillation, which, even when the patient wanders, is often to be distinguished in some fantastical expression of dread of insects, as, in health, he or she abhors, may (according to other symptoms present) identify or *forebode*:—depression of vital energy, and fainting, if the patient has suffered from very debilitating affections—such as excessive loss of blood or other animal fluids, or from very rapid or severe acute disease—determination of blood to the head—or a deranged or over-loaded stomach; and, perhaps, in the latter case vomiting.

3. *Obscuration of sight*, affords indications analogous to those of dark spots before the eyes, as just stated:

THE TASTE affords very important indications in respect of its alterations,—as, for instance:

1. Foul taste may originate either in local affections of the mouth, teeth, throat, etc., or in irregularities of the nervous system, as occurs



particularly amongst women of a highly susceptible, hysterical disposition, or, sometimes, also, without such causes, during pregnancy;—or, again, as associated with FEVER, in a tendency to putridity in the blood, which it, therefore, denotes to a certain extent;—or again, if *saltish* and putrid, as occurring in persons of a consumptive constitution, or under circumstances likely to provoke CONSUMPTION, it may originate in a suppurative condition of the last-named disease. Furthermore, a sweetish, saline, bitter, slimy, or harsh and acrid *taste*, especially if considerable phlegm be constantly in the throat, may be traced to the presence of an irritative condition of the stomach, occasioned by the presence of impure matters.

2. Loss or absence of taste may arise from some organic nervous affection; or, again, from cold, or derangements dependent upon cold.

THE HEARING may constitute a characteristic symptom, either in its excessive or deficient sensibility.

1. If deficient, as associated with FEVERS, and particularly with *typhus*, this very irregularity constitutes a *wholsome* indication.

2. If excessive, as associated with fever, we may identify either a degree of inflammatory action involving the brain, or, in general, too acute a susceptibility of the nervous system.

3. *Buzzing* or *ringing* in the ears, as associated with inflammatory action, or occurring without any apparent cause, or without either of the other conditions here mentioned—in persons of a full habit of body, may be attributed to congestion of the blood in the part; or, if associated with cold, to that with or without increased secretion; or again, to determination of humors to the ears, when more or less deafness usually qualifies the case.

THE SENSE OF SMELL is also qualified by two chief conditions, namely: (1) deficiency or loss of smell, which is attributable to nervous disturbance, or to the effect of cold (when associated with cold), or to indigestion; and (2) unnatural conditions of smell; as for instance:—the prevalence of putrid smell in the nose, which is attributable either to local disease of an ulcerative and putrid character, in the nose or palate, or to tendency to putridity in the blood, or developed as an early manifestation of disposition to apoplexy;—or peculiar smell (which is not putrid, but may be very disagreeable), and which consists of an affection of the olfactory apparatus of a spasmodic character.

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## CHAPTER III.

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### GENERALITIES.

#### 1. COUGHS, AND THEIR INDICATIONS.

COUGHS are of various significance, and point to various derangements, or *seats* of derangement, according to the conditions which precede, accompany or follow them, or by which they are immediately provoked. They constitute a series of manifestations which should never be overlooked in the investigation of disease, because it is clear that whether associated with direct or local inflammation of the respiratory apparatus, and of the lungs in particular, or with sympathetic affections



of these organs, originating in other organic causes of irritation, whether in the stomach and digestive process generally, or particularly in the spleen, liver, etc.; the presence of cough indicates, for the time being, one of two conditions respecting the respiratory apparatus, namely:—either 1) that there is in the system some cause of irritation oppressing these organs directly, or reacting upon them from other parts.

If the affection be merely sympathetic, caused, as is very frequently the case, by irregularity in the process of digestion, chronic derangement of the lining membrane of the stomach, etc., or by the presence of any impure substance in the stomach or bowels, either received from without, or spontaneously engendered from within, it does not indicate circumstances of much consequence, as regards the organs of respiration, and should be dealt with purely as an affection of the stomach or bowels, etc.; with this reservation, however, that if the increased irritation of the lungs, etc., be allowed to continue too long, for want of the removal of such provoking cause in the digestive process, it may lead to congestion of blood to the lungs themselves.

If the respiratory organs themselves be clearly the seat of the affection, it may be the product of the congestion of blood, suppuration, tubercles, etc., or of a purely nervous affection; or, again, of inflammatory action in the lungs, or the ramifications of the wind-pipe, or primarily of common catarrh, etc.

THE CONDITION OF PERFECT HEALTH, as respects the respiratory organs, is, therefore, in any case, inconsistent with the presence of cough; for when no cause of irritation, either local or sympathetic, is present, there will be no cough, nor anything to impede the breath, and a deep inhalation may take place, the air being retained for many seconds in the lungs, without the slightest disposition to cough.

If the habit of body be such as to lead to the suspicion that there is some latent taint in the system; or, if again, the taint be testified by morbid affections of the glands, skin, or bones, or by tendency in every affection to assume a sluggish, chronic character, or by continual inflammatory or ulcerative affections of the eyelids or gums, *every* cough may be of momentous importance, and should lead us to investigate its cause, and to treat the affection, of whatever character, without delay, lest, while we pause, it should run on to organic affection of the lungs, and degenerate into consumption.

*Short dry cough*, accompanied by watering of the eyes, and frequent fits of sneezing, in the early stage of acute fever, usually prognosticates measles. It may likewise (without such particular accompaniments) announce an eruption of another character.

*Cough*, (generally), *painful*, *hacking cough*, associated with acute FEVERS (other than those originating in, or associated with cold), may often be the foreboding symptom of incipient inflammation of the lungs; when the manifestation of crepitating (crackling) breath will frequently be decisive.

*Predisposition to cough*, as the result of every exertion of the lungs—such as the accelerated breathing caused by the rapid motion, or speaking, or laughing; or even as occasioned by mental or moral excitement—such

as emotions, etc., or, again, as the result of every derangement of the system, usually identifies a tendency to organic affections of the lungs.

*Chronic, dry cough*, especially if associated with more or less difficulty in breathing, and readily provoked by the slightest causes, and accompanied from time to time with stitching sensations, or pains in the chest, would lead to the belief that tuberculous disease had set in.

## 2. TRANSPIRATION FROM THE SKIN, AND SWEAT, AND THEIR INDICATIONS.

The more distinctive method of dividing the consideration of this cutaneous process, would be to consider "transpiration," properly so called, as a healthy, natural operation—indicative of derangement only, when qualified by excess or deficiency. Excess of transpiration, under the name of *sweat*, and deficiency of transpiration, under the name, of *dryness of the skin*.

1. The transpiration of *health*, is evinced by softness, with slight moisture of the whole surface of the skin, in an *equal degree*, and without any roughness, crackling, extreme tension, shriveling, or withering, or flaccid, flabby looseness of the skin, but with natural fullness and elasticity; and it consists of a continual, imperceptible, gaseous exudation.

2. *Sweat* is a disturbed degree of transpiration, characterized by excessive discharge of humor of the skin; it may be perfectly consistent with health as the result of severe corporeal exertion; but in relation to disease, sweat must be considered as of two distinct kinds: (1) that which accompanies the healthy determination or crisis of disease, or by which such healthy determination is effected, which is called *critical*, and (2) that which occurs *before* the critical period, which is followed by *no* relief, but rather by aggravation, or which is excessively profuse, which forebodes, or ushers in, or originates from the peculiar operation of *disease itself*, especially characterized by the eruption of pimples (and not of a healthy reaction), which is called symptomatic.

Of the latter variety—symptomatic sweats—we may particularly notice (1) sweat occurring in the morning (without previous habit of the kind) and which, if associated with FEVER, identifies its hectic character; (2) offensive sweats, which, as associated with fever, identify putrid typhus; (3) sweat emitting a sour smell, which commonly characterizes the fever as miliary; (4) local sweats, as, for instance, on the chest, or about the head, which are characteristic of determination of blood to those parts; (5) cold sweats, which denote a depression of vital energy, and which, in the last stage of prostration, forebode dissolution; (6) transitory sweats, as opposed to the continuous sweat of a wholesome crisis. (7) Symptomatic sweats may, however, be caused by a mere accessory mismanagement—such as want of ventilation, and excessive heat of the apartment. The use of feather-beds, which is much to be deprecated, especially in cases in which fever becomes developed, or the superfluous (and very mistaken) excess of covering; (8) otherwise we may generally attribute them either to great debility of the whole system, as associated with depressed pulse, etc., especially if occurring after long and debilitating diseases, severe loss of blood or other animal fluids, or other exhausting causes; or to accumula-

tion of noxious matters or substances in the stomach, when they will appear more particularly about the *forehead* and face, and will usually be cold and clammy; or again, to overdue activity of the circulation, accompanied with comparative deficiency of energy in the functional processes of the skin.

CRITICAL SWEAT, on the other hand, is to be distinguished (1) by affording general relief, and by the simultaneous modification of every source of suffering and the subsidence of the irregularities of the pulse; (2) by being *warm* and *clammy*; (3) by being developed over the whole surface of the body simultaneously; (4) by the subsidence of all restlessness, nervous irritation, or mental uneasiness, and the occurrence of calm, even, undisturbed sleep; (5) by continuity; (6) by the period of its development, in relation to the duration and course of a fever—viz., on what is termed the critical day of those fevers which run a regular course, and usually resolve themselves into an issue about a given period, as on the seventh or fourteenth day, etc.

### 3. THE COMPLEXION, AND ITS INDICATIONS.

*Red florid complexion*, commonly identifies determination of blood to the head, or a full habit of body in general.

*White* (cold, dead white) complexion of young females at the critical age, denotes a difficulty in the sexual transition—green sickness.

*Faint-yellow complexion*, usually denotes intestinal disease—disease of the bowels.

*Deep-yellow complexion*, on the other hand, identifies jaundice, or even organic disease of the liver.

*Pallid complexion*, with (more usually) meagreness, want of fullness of the skin, commonly identifies the stomach and intestinal canal as the seat of disorder, and may be caused by any obnoxious or impure matters therein—such as worms (in particular), or associated with acidity of the stomach; with a drawn, sunken appearance (especially), it denotes spasm; with (more usually) puffiness of the flesh, it is associated with constitutional weakness, qualified by sluggish circulation or congestion, or excess of watery humor (as a constituent) in the blood, or by deficiency of blood.

6. *Patchy redness* of the complexion—that is, redness as of a flush-spot on the cheek, denotes a hectic disposition.

7. *Sudden and total change* in the appearance of the complexion, is often to be considered as a very serious manifestation.

8. *Livid spots*, may, in advanced age, lead to an apprehension of apoplexy, as indicating inactive accumulations of blood upon important organs (with stagnant circulation); the general indication, however, afforded by this manifestation, is that of a putrescent condition of the blood (as associated with scorbutic habit of body).

9. *Blue, or livid complexion* (habitual)—organic affection of the heart.

### 4. SOUNDS EVINCED BY THE CHEST, AND THEIR INDICATIONS.

The only varieties which have been considered susceptible of general investigation, or which appear appropriate for the consideration of un-

professional persons, are such as are plainly manifested, by what is termed *percussion*—that is, by tapping upon the chest, etc., with the tips of the first two fingers of the right hand, or upon the index finger of the left hand being laid flat upon the surface,—and which we shall confine to the *clear* and *dull* sounds. Auscultation, or the act of listening by the application of the ear to the chest, (*immediate*, or by the unassisted ear—*mediate*, or by the stethoscope), requires anatomical knowledge, and considerable experience, to insure a correct interpretation.

1. *The clear sound*,—or that which conveys the idea of an unoccupied cavity,—is a sufficient evidence that the cavity of the chest and the lungs are free from any abnormal formations or accumulations of obnoxious matters—such as blood, matter, water, etc.; and therefore indicates soundness.

2. *The dull or muffled sound*, or that which conveys the idea of a cavity, the resonance of which is impeded by repletion, indicates the presence of accumulations, whether of blood, matter, or water, etc.,—and consequently unsoundness. The sounds elicited anteriorly, posteriorly, and laterally, on one-half of the chest, ought to be carefully compared with those of the other, but as the sound is naturally dull, over the region of the liver, we must not expect to find it clear below the sixth rib anteriorly, the eighth rib laterally, and immediately beneath the shoulder-blade posteriorly.

#### 5. THE VOICE, AND SPEECH, AND THEIR INDICATIONS.

1. *Loss of voice*,—which may be occasioned by paralysis, or by simple spasm in the organ of voice,—generally, however, indicates inflammation of the upper part of the wind-pipe; and if this symptom become permanent or chronic, it denotes organic disease of the part.

2. *Hoarseness*—is likewise a symptom which originates in the upper part of the wind-pipe; and may consist of a temporary congestion or inflammation resulting from cold, or may denote organic disease of the part.

3. *Stammering*,—as associated with FEVER, is a symptom of great moment, and which may sometimes be distinguished and foreshadowed in the *early* stage of disease, by the imperfect pronunciation of particular vowels or syllables,—in which case it should be held to forebode severe affection of the brain. It is a frequent premonitory symptom of apoplexy.

4. *Loss of speech*,—is a very grave symptom when it occurs associated with concussion of the brain, apoplexy or typhus. Or it may be associated with worms or other noxious matters in the intestines, or simply with hysterical disposition: or, again, it may be the result of spasm, in which case it may assume a periodicity.

#### 6. TEARFULNESS AND LAUGHTER, AND THEIR INDICATIONS.

1. *Copious watering of the eyes*,—in the early stage of FEVER, commonly forebodes measles; or, if occurring in the course of acute fever it usually denotes determination of blood in the head.



2. *Tearfulness or weeping*,—provoked by the most trivial causes, is one of the chief manifestations of hysterical disposition, the same being the case of laughing; wherefore, the two symptoms are generally combined, and the one succeeds or runs on into the other. In such cases, however, *laughter* is generally the *first* symptom, which, becoming prolonged and convulsive, is converted into weeping.

An excessive susceptibility and tearfulness, or weeping upon the slightest vexation, or upon fantastical grounds of vexation, is similarly indicative of a hysterical disposition, and is one of its chief indications.

3. *Laughter*,—in every case denotes a great degree of nervous irritation, both as regards the superior faculties, and the animal functions; if there be a predisposition to laughter, which is provoked by very trifling causes, a hysterical disposition is clearly identified, as already stated, under the head of tearfulness,—if associated with FEVER, this symptom often forebodes convulsions or delirium.

#### 7. LOSS AND UNHEALTHY INCREASE OF FLESH, AND THEIR INDICATIONS.

1. *Accumulation of flesh* (fat),\*—which is sudden, excessive, or otherwise irregular, is usually associated with organic disease of the liver, but may, at any rate, be very closely watched to detect the first manifestations of distinctive indications of disease.

2. *Emaciation*, or loss of flesh, when it does not occur as the result of fever, or of distressing affection of the mind—such as deep and gnawing grief, or continued mental excitement, etc.,—may be attributable (1) to undue and irregular discharges of blood, etc., evacuation of water, and the like; (2) to disease of the lungs, or of other organs connected with the respiratory apparatus; (3) and most frequently to derangements involving the digestive functions, and seated either in the stomach or bowels.

#### 8. SNEEZING, YAWNING, GROANING, ETC., AND THEIR INDICATIONS.

1. *Sneezing* is directly caused by irritation of the nerves connected with the lining membranes of the nose, and consists of a convulsive *respiration*;—it may be the result of irritation in the bowels, and as such, when it occurs very frequently in children, without being associated with any more direct cause (as here stated) we may infer the presence of worms, as the provoking cause;—or it may occur as an incipient symptom of measles, if associated with FEVER which cannot be traced to cold; or again, it may be the mere manifestation of cold in the head.

2. *Yawning* is the result of sluggish passage of blood through the lungs, and if associated with FEVER, whether acute or intermittent, in its incipient stage, it identifies one of two conditions, either a spasmodic or a debilitated state.

3. *Groaning* may be attributable to purely mental causes, with which, indeed, this symptom is generally associated;—otherwise it affords the same clue to the distinctive nature of the affection as the preceding symptom (yawning).

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\* It is not unworthy of notice, that the same symptom has been identified amongst the inferior animals as accompanying the earliest stage of diseases, resulting from obstruction of the biliary ducts.



## 9. THE SALIVA, AND ITS INDICATIONS.

The distinctive features respecting the saliva, as indicative of more or less derangement, are either an increased or a deficient and diseased flow of this fluid, as compared with the habitual condition of health respecting it.

1. *Deficiency of Saliva*, or dryness of the mouth and throat, denotes either (1) a deficiency of the watery humor as a constituent of the blood, and consequently an inflammatory or feverish condition,—in which case it will occur as a continuous symptom, associated with extreme thirst;—or (2) may originate purely in spasm, in which case it will occur but casually, and if attended with unnatural thirst, the latter symptom will disappear with the direct cause, and with the resumed action of the salivary glands. A diseased state of the saliva, which is so frequently associated with indigestion, may be manifested in the form of a thick and tenacious, or,—though less often,—a thin and acrid fluid.

2. *Increased flow of Saliva* may either be critical, as, for instance, in smallpox, or in sluggish nervous FEVERS, or in FEVERS generally, as occasioned by, suppression of transpiration (through the skin); or it may be symptomatic (in which case it may either identify a purely local affection of the salivary glands, or be associated with sympathetic disorders originating in the stomach or intestines,—such, for instance, as that deranged state which gives rise to the existence of worms); or again, it may be associated with sore throat.

## 10. THE EXPECTORATION, AND ITS INDICATIONS.

1. *Expectoration*, which indicates a wholesome determination or *crisis* of disease, especially inflammatory diseases affecting the lungs, is technically termed “critical,” is identified by the facility with which it is detached and expelled, by the absence of pain associated with it, and, on the contrary, by the relief which it affords—and by exhibiting a thick agglomerative consistency and yellowish color, occasionally modified by a few slight streaks of blood.

2. *Expectoration*, which is expelled by an effort, such as *repeated* hawking or coughing, or which causes more or less acute pain or soreness in the effort to detach it, may either denote the presence of accumulations of obstructive and obstructed matters in any of the air-cells or tubes, or in the windpipe, or whence the discharge of expectorated matter proceeds, as the result of a continued irritation.

If jelly-like, or sticky and rusty-colored, it will usually indicate inflammation of the lungs.

If transparent, stringy, or sticky, sometimes streaked with blood, and expectorated with much difficulty and without relief to the patient, it commonly identifies acute inflammation of the tubes of the lungs (bronchitis); in which affection a change in the expectoration to that of an opaque yellow, or greenish-white colored substance, which is easily coughed up, and is followed by considerable relief, gives evidence of subsiding inflammation.

If it be of the character of matter, or if whitish streaks are seen, or small whitish-yellow, sometimes globular, masses, connected together by

or floating amongst sticky phlegm (continuously), it is usually a symptom of suppurative (the second stage of) consumption; again, if it consist of masses of substance of a brown or greenish-white color, and which flatten at the bottom of the vessel, into a shape resembling a piece of coin, it is an indication of an advanced stage of consumption.

If it be of pure blood, it may be the result of inflammatory action, or of consumption; but it is very frequently the offspring of congestion, or an overcharged state of the vessels of the lungs. If a permanent symptom (and not a critical expectoration), it is generally of much import.

If yellow, and particularly if also *bitterish*, affection of the liver is identified.

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## CHAPTER IV.

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### DIET AND REGIMEN.

These excellent rules on diet have received the approbation of all classes; the self-denial imposed seems more stringent than it will prove on being carried into effect. Many individuals, in the author's own experience, have pursued the same system of diet, after they had no further occasion for medical assistance, thus continuing from choice what they had begun from necessity.

These dietetic rules consist merely in the avoidance of medicinal and indigestible substances during treatment, both as calculated to interfere with the action of the medicines and the proper functions of the alimentary system. Consequently, among liquids, the articles generally proscribed are green tea or strong black tea, coffee, malt liquors, wine, spirits, and stimulants of every description; lemonade, or other acid or alkaline drinks, and natural or artificial mineral waters. On the other hand, cocoa, unsiced chocolate, toast, rice or barley-water, oatmeal gruel sweetened with a little sugar, or raspberry or strawberry syrup, if desired; whey, milk and water, or pure milk not too recent from the cow, boiled milk, and, in some instances, butter-milk, or, in fact, any non-medicinal beverage is allowable.

The diet should, however, be accommodated to the peculiarities of constitution in individuals; for instance, some persons cannot take the smallest quantity of milk without serious inconvenience; others throw out a rash after partaking of fish; and, again, others loathe the very sight of animal food. These peculiarities should also be taken into account in the selection of the remedies.

Of the varieties of animal food, pork, young or salted meats, and, amongst poultry, ducks and geese, were better avoided, particularly when derangement of the digestive functions exist. Beef, mutton, venison, and most descriptions of game, if not too long kept (high), pigeons, larks, rabbits, etc., are allowable at discretion. (Refer to the Synopsis.)

Fish is a wholesome article of diet, and may, in most cases, be partaken of occasionally, with the exception of the oleaginous species—such as eels, salmon, etc.; or shell-fish—as lobsters, etc.; and all kinds of salted, pickled, potted, or smoked fish.

Eggs, when known to agree; butter, if free from rancid or unusual taste; cream, plain unseasoned custards, and curds, are also admissible in moderation.

*Stimulating* soups and high-seasoned or rich-made dishes are directly opposed to this regimen. Beef tea, veal and chicken broth, etc., thickened with rice, macaroni or sago, and seasoned merely with a little salt, are of course allowable.

Amongst vegetables, all of a pungent, aromatic, medicinal, or indigestible description, or greened with copper, are prohibited; such as onions, garlic, eschalots, asparagus, radishes, horse-radish, celery, parsley, mint-sage, mushrooms, etc., but others free from such qualities, such as potatoes, french-beans, green peas or beans, cauliflower, spinach, seakale, mild turnips, carrots, etc., may be used with the needful precaution of avoiding any particular article of diet, whether of the *animal* or *vegetable* kingdom, that may seem to disagree in the particular case in question. Lemon or orange-peel, laurel leaves, bitter almonds, peach leaves or kernels, fennel, aniseed, marjoram, etc., are objectionable; acids, and the ordinary condiments, such as pepper, mustard, pickles, etc., and salads, ought either to be sparingly partaken of, or entirely abstained from, particularly by persons predisposed to indigestion. Salt and sugar in moderation are admissible.

All kinds of light bread and biscuit, free from soda or potash, and not newly baked; also simple cakes, composed of flour or meal, eggs, sugar, and a little good butter; or light puddings, such as bread, rice, sago, semolino, without wines, spices, or rich sauces, are admissible; but colored confectionery, pastry, and in some cases also *honey*, must be rejected. Regularity in the hours of meals should be observed, and too long fasting, as well as too great quantity of food at one time, should be avoided.

It is not sufficiently considered that *excess* in eating, even wholesome and digestible food, is a most grievous error. The lightest diet will impede the operation of the digestive functions if the stomach be overloaded. It were always better to leave the table unsatisfied than to indulge in any excess in this particular. Nor should it be forgotten, that a craving appetite, which induces an inclination to eat excessively, is in itself an unhealthy condition, which requires to be counteracted, rather than to be encouraged.

During fevers and inflammatory affections, the patient must of course be kept upon a low regimen—gruel, barley-water, etc., and at the commencement of convalescence a light pudding, with a little weak beef tea, or mutton or chicken broth, should form the whole of the nourishment given. Nature, however, is our best guide; and whenever she takes away appetite, the necessity of not taxing the digestive functions must, with rare exceptions, be deemed imperative. (See *Fever* and also *Synopsis of the Rules for Diet*).

#### CLOTHING AND HABITS.

Upon the first point it were scarcely worth while entering into any observations, were it not simply to remark upon the impropriety of wearing garments impervious to air, and fitting closely to the shape, and

the custom of exposing the extremities and chests of young children to the chilling atmosphere of our peculiarly variable climate, under the absurd idea of making them hardy. The evil consequences arising from the check given to perspiration, by the first-mentioned practice, are too well known to require any particular comment; but as the other is an error widely prevalent, I consider it my duty to mention it; and I feel assured, that, if mothers would only reform their system, and clothe their children in a more rational manner, they would make no slight advance towards the prevention of serious affections, not only during childhood, but in after life. Cotton, linen, and even leather worn next to the skin, are generally preferable to coarse woollens.

As regards habits, it may be briefly observed, that a regular method of living, avoiding ill-ventilated apartments, late hours, dissipation, over-study, anxiety, and other mental emotions, and taking sufficient air and exercise, are the best preservatives of health.

The frequent use of hot-baths is injurious and liable to retard the cure under treatment. The idea that sea-bathing is almost universally beneficial is exceedingly erroneous; there are many constitutions on which it acts prejudicially. Medical baths, either natural or artificial, are strictly forbidden. Bathing the whole frame daily with a sponge or wet towel, with cold or scarcely tepid water, and the use of the flesh-brush, are by no means objectionable, and frequently indeed strongly to be recommended. (See Notes on the Use of the Bath.)

#### ADMINISTRATION AND REPETITION OF HOMOEOPATHIC MEDICINES.

The method, quantity, potency, and frequency to be selected and observed in the administration of the remedies, will be stated more explicitly as regards particular cases in the subsequent directions for the treatment of diseases.

There will also be additional particular in the Remarks on Internal and External Remedies; and material assistance may be derived from the Repertory. Yet much will still be left to the discrimination and judgment of the administrator; because it is obvious, that a multiplicity of exceptional cases and conditions will arise, to which no general rule and few special regulations will apply. In instances of this description the particular character of each symptom *distinguishable by the conditions under which it is manifested*—or still more properly the *assemblage of symptoms similarly qualified by conditions*, will be the safest guide for the judicious selection of the remedy; and the continuance, return, suspension, aggravation, palliation, modification, or change of such particular features of ailment, will serve to regulate the repetition, suspension, or change of the remedy. The same circumstances will also frequently guide the administrator to change the potency, *when the remedy he has selected is evidently indicated, but has not been followed by adequate results*; or in other instances to adopt an *analogous remedy*, when both of the previous methods have equally failed.

In pursuing such changes, great care should be taken in turning to the Table of Analogous Remedies, and from thence to the Repertory, and in



thereby selecting the remedy or potency whose operation assimilates most nearly to the aggregate features of symptoms and conditions in the case.

THE FORM OF THE MEDICINE.—With respect to the *form* in which the medicines should be used, see the leading notification under the head of "Remarks and Regulations respecting Internal Remedies and Doses."

REPETITION AND SELECTION.—The following are a few of the general rules to be observed in the domestic employment of the homeopathic medicines:—

In diseases which are severe, and run their course rapidly, we must carefully watch the symptoms, and when we feel assured we have chosen the proper remedy, if no perceptible medicinal aggravation or improvement declare itself, but the disease seems to gain ground, *repeat* the medicine. In cases of high inflammatory action, *Aconite* or *Belladonna*, etc., should sometimes be repeated at intervals, varying from fifteen minutes to two, four or six hours.

If a medicinal aggravation take place, followed by improvement, we must let the medicine continue its action, until the improvement appears to cease, and the disease again makes head; if new symptoms set in, we must then have recourse to the medicine thereby indicated. Should, however, no perceptible medicinal aggravation take place, but improvement follow, we may safely await its approach to a termination, ere we again administer. If any symptoms remain, from the remedy first selected having afforded only partial relief, we must have recourse to some other medicine, which seems best fitted to meet them; but refrain from changing the remedy as long as benefit results from its employment.

In diseases whose symptoms are obstinate and long-continued, and in those which are virulent, but of short duration, as well as in those which partake somewhat of these features of violence, when a very striking improvement takes place, it will generally be found advantageous to *cease to administer the medicine* as long as the *improvement* continues, and only to repeat as soon as the slightest symptoms of activity in the progress of disease reappear. But when a sudden or marked improvement, of comparatively short duration, follows the first dose of a remedy, and on repeating the dose, the symptoms of the complaint increase instead of subsiding, as they did in the first instance, it may be concluded that the medicine does not answer, and that another must accordingly be had recourse to, in the selection of which it will be necessary to choose one *related* or *analogous* to the remedy first prescribed.

The distinguishing of the medicinal aggravation from that of the disease, being a point of material consequence, we shall here give the leading and most usual characteristics of each. The *medicinal* aggravation comes on suddenly and without previous improvement; the aggravation of the disease more gradually and frequently *following* an amelioration. Lastly, the pulse is also a discriminative guide, particularly in fevers and inflammations. Thus, when it becomes less frequent, or when, at all events, it does not increase in frequency, on an accession of aggravation, the exacerbation is to be attributed to the *medicinal* influence; but when the



reverse is the case, the aggravation of symptoms must be considered as depending on the advance of the disease.

We cannot attach too much importance to the necessity of careful watching the effects of each dose, as, in addition to the temporary aggravation of the symptoms which sometimes set in, a development of collateral or medicinal signs occasionally takes place, particularly after frequent repetition of different remedies, in susceptible patients. By a want of attention, therefore, to this important point, we may incur confusion, and may be unconsciously treating a temporary medicinal disease of our own creation. We must also guard against falling into the opposite extreme—that of allowing the disease to gain head unchecked.

Slight diseases are often removed by a single dose of a well-chosen medicine; the more severe and deeply-seated disorders are also frequently removed by a single dose of a well-selected, or specific remedy; but in general cases, and particularly those which have been long and rudely treated by other means, a frequent repetition is usually required.

As a general rule, however, a given number of repetitions, more or less, according to the severity of the case, will serve to place the patient thoroughly under the influence of the medicine, after which the pause may be protracted so long as the indications of *progressive improvement* are present. If, then, it becomes necessary to resume the administration, it will generally avail *at remoter intervals* than during the previous course. In complaints which are of a mild, though sluggish type, and which are unattended with any critical characteristics, the intervals, in the first period, may vary according to circumstances, from six to twelve hours. But in most complaints, in which constitutional or local inflammation is present, the intervals, in the first period, should not exceed *four hours*, and when important organs are involved, and constitutional fever runs high, these intervals should not, at first, exceed *two hours*.

In severe acute affections, such as inflammations, fevers, etc., we may often repeat the *same medicine in the same dose, at regular intervals, as long as it does good*: but this rule has many exceptions, and the directions already given at the commencement of this article should be borne in mind.

In obstinate and lasting cases, by a long-continued administration of the same medicine, the patient often becomes less susceptible to its action; in such instances, if the improvement remains stationary, or progress slowly, we may gradually increase the dose, or, still better, give, at suitable intervals, some other remedy or remedies, of as nearly analogous medicinal properties to that first administered as possible, and then return to the original remedy, if needful; if, on the other hand, decided amelioration follow each administration, we should allow a longer interval to elapse before repeating, by which means the system gradually recovers itself, and the susceptibility to medicinal influence remains unimpaired until the cure is completed.

In rare cases, this susceptibility increases; in such instances a higher potency should be selected—provided the remedy still appears to be ap-

propriate—and the *intervals* between the doses should be *lengthened*. This occasionally occurs when the medicine has been frequently repeated, and given in solution. When the beneficial effect of a medicine is interrupted by any intermediary irregularity, such as, attack of cold, looseness of the bowels, etc., some other medicine must be given for the new affection, on the removal of which, the medicine, which was previously acting favorably, must be again used.

In the SELECTION OF THE REMEDY, it is not necessary that *all* the symptoms noted should be present; at the same time care must be taken that there are no symptoms uncovered by the medicine, or which more strongly indicate another remedy.

## REMARKS RESPECTING INTERNAL REMEDIES AND DOSES.

### PRELIMINARY OBSERVATIONS AS TO THE FORM OF THE MEDICINES.

The *Form* in which Homœopathic Medicines are employed for internal administration requires some particular notice, in order that the reader may have an additional opportunity of administering the medicine with the medium or vehicle which may be most likely to promote its active operation in the case under consideration. It is well known that the medicines are prepared in three distinct forms, namely:

#### GLOBULES, TINCTURES, AND TRITURATIONS OR POWDERS.

1. GLOBULES (or pellets of sugar of milk saturated with the tincture), are, in the great majority of cases, the only form required for *domestic* treatment, and so greatly facilitate the explicitness of the directions for doses, that in the first instance, all the medicines comprised in the list of the remedies which are quoted in this work, must be understood to be recommended in *globules*, (at the potencies, also, stated in that list).

*Dose*.—For *adults* eight globules, either dry or dissolved in a little water (a teaspoonful).  
For *infants* two globules in the same manner.

2. TINCTURES might, as far as practical purposes are concerned, be coupled with *Triturations*, the latter being the form in which those remedies which are *insoluble* are *first* made, and consequently which represents those lesser degrees of attenuation which are administered in a *fluid form*—of such remedies as do not require such pulverization to render them soluble (or *approximately* so). It is this fluid form of soluble substance which is called the *Tincture*. *Tinctures* at low potencies (*i. e.* from the 1st to the 3d, and even, in some exceptional cases, the *mother tinctures*) have, upon the whole (like *Triturations*), been found better adapted to the treatment of *acute diseases* and some forms of *scrofula*, *ague*, etc.

*Dose usually employed*.—For an *adult*, two drops to a spoonful of water; or, in cases in which the substance medicating the tincture is precipitated (becomes thickened) by water—as, for instance, camphor,—then give two drops on a small piece of pure loaf sugar.

For a *child* above two years and under twelve years old, one drop—constituting from two to three doses, according to the strength of the child.

For an infant under two years old, one drop, similarly divided into six to eight doses.

3. *TRITURATIONS*, as has already been explained in speaking of *nectures*, represent the lower potencies (as administered in the latter) in *POWDER*, of substances which are not susceptible of *immediate* (approximate) solution, and which require previous and *repeated pulverization*, and extreme and minute distribution. The administration of *Triturations* is adapted to circumstances such as those just mentioned in relation to the *Tinctures* (of completely soluble substances).

The objection to *Triturations* for unprofessional persons is, that being in *powder*, we have no other means of naming a precise quantity for the dose than by indicating the *weight*. Persons, therefore, who are in the habit of using them, should furnish themselves with appropriate and well-approved scales.

*Dose usually employed.* For an *adult*, from half a grain to a grain, about what would lay on the point of a penknife blade of medium size.

For a *child* between two and twelve years old, half a grain distributed as equally as possible into three portions—one of these third portions constituting a dose.

For an infant under two years old, one-sixth part similarly.

1. Previous to undertaking the treatment of any affection it is advisable that the article on the ADMINISTRATION AND REPETITION OF THE MEDICINE should be carefully studied.

2. Should the progress of the malady, notwithstanding treatment, without a distinct change in the nature of the symptoms, indicate a change of the remedies, it is advisable that the TABLE OF ANALOGOUS REMEDIES should be consulted in the selection of the new remedy.

3. In cases in which the distinctions between the indications for different medicines prescribed are so slight as to leave the least doubt on the mind of the administrator, as to which he should select, the decision will be determined by making out the list of symptoms and referring to the Repertory.

This difficulty may frequently arise where two or more medicaments are of closely analogous operation.

4. OF DOSES FOR INFANTS AND CHILDREN.—Where no particular direction is given for the treatment of young children, or children under the age of twelve years, it is to be understood that the dose in general cases, should be in the proportion of one-third of that directed to be taken *generally*, or *especially for an adult*, as nearly as that proportion can be ascertained.

The general dose for an infant, under six months of age, may be stated at the proportion of two globules to three tea-spoonsful of water, which solution should be administered by the tea-spoonful at each dose.

The general dose for an infant, between six and twenty-four months old, may be stated at two globules to the tea-spoonful of water for each dose.

5. OF POTENCIES.—With respect to the POTENCIES or DILUTIONS to be employed, although it is by no means an essential point, still, as all the directions for treatment hereinafter given have been drawn in conformity with that scale, it is well that they should be in accordance with those quoted in the table of medicines and dilutions prescribed in this work.

6. OF THE DIVISION OF DOSES AND SOLUTION.—The doses prescribed in this work are all directed to be taken in solution, as that is doubtless the most efficacious method of administration. *But when that is not convenient, or is rendered impossible by the state of the patient, the globules may be administered dry, by being placed on the tongue.*

When the solution of any medicine in water has to be kept more than three days before the whole is consumed, it is necessary to preserve the water from decomposition, by *adding six drops of proof spirit to the two table-spoonful of solution.* In very hot weather, one day should be the limit beyond which no solution should be kept without such infusion of spirit. When it is not convenient to add the proof-spirit to the solution, the only way of obviating deterioration is to *make a fresh solution at the expiration of every such stated period of time.*

The best medium of solution is *distilled water*; the next, *filtered or pure rain-water*; the next, water which has previously been boiled or pure spring water.

7. OF THE RECURRENCE, SUSPENSION, ETC., OF DOSES.—It were impossible, as has been already stated, in laying down a general rule for treatment, *always to assign a given recurrence of the dose of any remedy,* without being as egregiously wrong in one case as one might be positively right in another. The discretion of the person who uses the medicine, guided by a careful study of the ARTICLE ON THE REPETITION OF MEDICINES must indicate the frequency of the doses—the pause—the renewal—and the change—according to the conditions of each particular case.

As far as the frequency, suspension, and resumption in the exhibition of medicine can be reduced to a systematic scale, this has been done in the subjoined Table, from which the patient may *occasionally derive* assistance, but to which he must not trust in the least exceptional instances.

Great care must be taken in distinguishing between the scale set forth for *acute*, and that designed to direct the treatment in *chronic* disease.

THE CONSTITUTION, TEMPERAMENT, and HABIT OF BODY must also modify all set regulations in respect of the recurrence, etc., of doses. Highly susceptible subjects require more sparing treatment, and must be closely watched to observe the earliest indications in the cessation of effect, medicinal aggravation, or other exceptional conditions.

8. OF CONSECUTIVE TREATMENT.—It is a manifest error, in treating of any malady, to direct a patient positively *to begin* by the administration of this or that remedy. Every malady may develop itself in a variety of ways. The incipient stage of the same disease, even, is scarcely ever identical in two cases. In all instances, the development of complaint must depend upon CONSTITUTIONAL TENDENCIES, ATMOSPHERIC INFLUENCES, EXTERNAL CIRCUMSTANCES especially relating to each case, CONDITION OF THE SYSTEM OF PREVIOUS TREATMENT, etc.

All the remedies which are applicable to the treatment of any complaint within the proper province of domestic management, *together with the symptoms which indicate the exhibition* being detailed, *the only way in*



*which an unprofessional person will avoid error is by invariably selecting THE REMEDY INDICATED BY THE SYMPTOMS THAT ARE PRESENT, and the CIRCUMSTANCES WHICH ATTEND THEM, irrespective of any ORDER OF SUCCESSION, except where (as next stated) a particular course of medicines is directed to be taken in rotation.*

When the medicines prescribed in this volume are intended to be taken in succession, one after the other, or in alternation, etc., they will be invariably indicated by figures, viz.:

(1.) MERCURIUS. (2) SULPHUR. (3) CALCAREA.

As a general rule, however, when *consecutive treatment is required with medicines of analogous properties to those below stated*, it will be found that such as are named as *operating beneficially after others*, will be preferable for selection in *such relation to former treatment*, viz.:

- After ACIDUM-NITRICUM—Calcarea, Petroleum, Pulsatilla, Sulphur  
 “ ACIDUM-PHOSPHORICUM—China, Lachesis, Rhus, Veratrum.  
 “ ACIDUM-SULPHURICUM—Pulsatilla.  
 “ ACONITE—Arnica, Arsenicum, Belladonna, Bryonia, Cannabis Ipecacuanha, Spongia, Sulphur.  
 “ ALUMINA—Bryonia.  
 “ ANTIMONIUM CRUDUM—Pulsatilla, Mercurius.  
 “ ANTIMONIUM TARTARICUM—See Tartarus-emeticus.  
 “ ARNICA—Aconite, Ipecacuanha, Rhus, Sulphuric-acidum.  
 “ ARSENICUM—China, Ipecacuanha, Nux-vomica, Sulphur, Veratrum.  
 “ BELLADONNA—China, Conium, Dulcamara, Hepar, Lachesis, Rhus, Stramonium.  
 “ BRYONIA—Alumina, Rhus.  
 “ CALCAREA-CARBONICA—Acidum-nitr., Lycopodium, Phosphorus, Silicea.  
 “ CARBO-VEGETABILIS—Arsenicum, Kali, Mercurius.  
 “ CHINA—Arsenicum, Belladonna, Pulsatilla, Veratrum.  
 “ CUPRUM-ACET.—Calcarea, Veratrum.  
 “ HEPAR-SULPHURIS—Acidum, Nitr., Belladonna, Mercurius, Spongia, Silicea.  
 “ IPECACUANHA—Arnica, Arsenicum, China, Cocculus Ignatia, Nux-vomica.  
 “ LACHESIS—Acidum-phosph., Alumina, Arsenicum, Belladonna, Carbo-veg., Causticum, Conium, Dulcamara, Mercurius, Nux-vomica.  
 “ LYCOPODIUM—Graphites, Ledum, Phosphorus, Pulsatilla, Silicea.  
 “ MERCURIUS—Acidum-nitr., Belladonna, China, Dulcamara, Hepar, Lachesis, Sepia, Sulphur.  
 “ NUX-VOMICA—Bryonia, Pulsatilla, Sulphur.  
 “ OPIUM—Calcarea, Petroleum, Pulsatilla.  
 “ PHOSPHORUS—Petroleum, Rhus.  
 “ PULSATILLA—Acidum-nitr., Bryonia, Sepia.



After RHUS-TOXICODENDRON—Acidum-phos., Ammonium-c., Arsenicum, Bryonia, Calcarea, Conium, Phosphorus, Pulsatilla, Sulphur.

“ SEPIA—Carbo-v., Causticum, Pulsatilla.

“ SILICEA—Hepar, Lachesis, Lycopodium, Sepia.

“ SPONGIA—Hepar-sulphuris, (for instance, in croup.)

“ SULPHUR—Acidum-nitr., Aconitum, Belladonna, Calcarea, Cuprum, Mercurius, Pulsatilla, Rhus, Sepia, Silicea.

“ TARTARUS-EMETICUS—Baryta-c., Ipecacuanha, Pulsatilla, Sepia.

“ VERATRUM—Arsenicum, Arnica, China, Cuprum, Ipecacuanha.

9. OF ACCESSORY OR PALLIATIVE TREATMENT.—In cases of obstinate CONSTIPATION, the use of the injection, or lavement, is allowable. The injection should consist of cold water, or, if that disagree, of tepid water; in some cases it may, also, be requisite to add a tablespoonful of sweet oil. The quantity of water necessary for the different ages may, under *ordinary* circumstances, be stated to be a pint for an adult;  $\frac{3}{4}$  of a pint for a youth of ten or fifteen;  $\frac{1}{2}$  a pint for a child between one and five years of age; and about one ounce for an infant at birth, or soon after.

IN CASES OF ACUTE, EXTERNAL, AND LOCAL INFLAMMATION, or more particularly, with wounds in which there is a lodgment of foreign substances, which cannot be extracted, or, where suppuration is not sufficiently progressive, we may have recourse to an application, of the nature of a poultice, such as that which is described in the ensuing page, (93.)

All appliances and methods, such as bleeding, cupping, leeching, blisters,—all medicines resorted to according to the old practice—and all patent medicines are strictly prohibited.

10. PRECAUTION TO INSURE A PROPER DOSE.—When the administrator is not certain that the patient will adhere rigidly to the dose prescribed, or when given doses of medicines have to be sent to a distance, the simplest and safest expedient is to drop the globules into as much SUGAR OF MILK as will envelop them securely, fold the contents together in a slip of *clean unglazed paper*, and crush them *from the outside* with the blade of a knife, or some other hard and even substance.

11. WHEN MEDICINES SHOULD BE TAKEN, ETC.—The medicines should invariably be taken fasting (save the understated exceptions), and abstinence from food or drink for about an hour after the administration, is equally important. It is also of great consequence to abstain from excessive bodily or mental exertion, during treatment, and to keep perfectly quiet, if possible, for about an hour after the administration of medicine.

There are exceptional cases, such as modify this rule, which may arise out of accidents or sudden emergencies, but the rule should be followed as closely as possible, even in cases of this kind.

# INDISPENSABLE RULES FOR THE PRESERVATION AND MANAGEMENT OF HOMŒOPATHIC MEDICINES, ANTIDOTES, ETC.

1. Keep your chest closed or your phials in a dark, dry, clean, and cool place, free from odor or scent of any kind, or, if in a hot climate, in as regular a temperature as possible.

2. Do not change the corks, or use the same phials to contain a different remedy without having previously been assured that it has been thoroughly cleansed, first with boiling and then with cold water. It is better at all times to rinse a phial, which has already contained medicine, with spirits of wine, and to expose it uncorked to the action of great heat before it is filled with a different medicine. The cork or stopper should be submitted to the same process. The safest way of all is to *destroy empty bottles*.

3. Let all the medicines be carefully marked and labelled, and abstain from handling *two at one time*.

4. In preparing your solution for administration, be assured that the glass, or spoon, or other vessel in which you are about to mix it, is perfectly clean.

5. If it is necessary to prepare solutions of two or more medicines at one time, take care to keep them apart, and to mark them so that no mistake can occur.

6. Do not use the same spoon or other vessel to administer two different remedies, without having previously ascertained that it has been scrupulously cleaned. Porcelain spoons are preferable to any metal, on this account, because you are more certain of the thorough removal of any former medicinal substances.

7. If you dissolve your medicines in open vessels, such as tumblers, take the precaution to have them well covered down during the intervals between the administration, and keep them in a dark, dry, clean, and cool place, totally free from odor or scent of any kind.

8. Do not resort to any other medicinal agency during homœopathic treatment, and abstain from any external applications, except such as are prescribed homœopathically.

9. Avoid the use of all articles of perfumery, restoratives, cosmetics, and the like. Camphor, and other popular appliances for cleansing the mouth, etc., etc., are strictly prohibited. The same may be said of smelling salts, etc., etc.

10. The saturated tincture of camphor, as it is used homœopathically, must be kept entirely apart from any other medicines, or from any vessels or vehicles, such as powders, in which it is proposed to convey or to administer other medicines.

11. Do not change your course of treatment or your remedies (when change becomes necessary) too suddenly, or without allowing a sufficient pause to elapse, viz., at least two hours, if possible, six hours, in general cases of a severe inflammatory nature, and in malignant fevers—and at least from two to three days (48 to 72 hours), in disease of a chronic kind.

12. If the symptoms be so violent as to compel you to resort to immediate change after any previous treatment, administer one drop of spirits of camphor on a lump of sugar, or a teaspoonful of strong coffee, and then wait one hour, half an hour, or only a quarter of an hour, in urgent cases, before you proceed with further treatment.

When, as occasionally happens with persons who are *extremely susceptible* to the effects of the homœopathic remedies, an undue medicinal action is developed, giving rise to considerable local pain, or general constitutional disturbance, camphor is, generally speaking, the most effective antidote, particularly to the vegetable medicaments. (See the TABLE OF MEDICINES, ETC.) It may simply be inhaled by the nostrils, or a drop of *Tincture of Camphor* may be taken on a piece or lump sugar. Coffee, without milk or sugar, is also a useful antidote, provided the patient has not been long accustomed to its use. The same may, in a measure, be said of wine.

### SYSTEMATIC TABLE,

FORMING A SUMMARY OF THE RULES FOR THE ADMINISTRATION AND REPETITION OF THE MEDICINES.

In summing up the general regulations for the administration and repetition of medicines, the following particulars may be deduced :

### OF ACUTE DISEASE, NOT CRITICAL.

#### GENERAL INITIATORY REMARKS.

In Acute Diseases, not critical, when, after the lapse of four, or at the most, six hours, no amendment results, another remedy should generally be selected, or the general state of the patient and the nature of the disease should be re-investigated. When, on the other hand, in the course of an hour or two, symptoms of improvement ensue—such as *moist skin*, a clear state of the *intellectual faculties*, a happier frame of *mind*, or a gentle and undisturbed *slumber*, no repetition or change of medicine must be thought of, until a cessation of the improved condition of the patient becomes manifest.

In Acute Diseases of a severe and critical kind, however—such as severe inflammatory complaints, cholera, eroup, nervous fevers, asthmatic affections, etc., the repetition of the dose sometimes becomes necessary, every five, ten, or fifteen minutes—or, at all events, at intervals of from one to three hours, subject to the like conditions.

1. That there are two distinct periods in the course of treatment:—*the first period*, or that in which the medicine is more rapidly repeated to establish a medicinal ascendancy over the disease; and the *second period*, or that in which the treatment is resumed and continued to complete the cure, or, until change of treatment.

That these two periods are advantageously divided by a pause, during which the medicine may be suffered to exhaust its action, and the variation of symptoms, etc., observed.

That during the first period, in the treatment of *acute disease*, which is not of immediately *critical* character, the intervals between doses

should extend over from two to four, or even six, hours, according to the severity of the symptoms.

That as a general rule, a course of two, three, or four doses, according to the length of the intervals, will constitute the first period; the greatest number of doses agreeing with the shortest intervals.

That the pause, at the conclusion of the first period in the treatment of such diseases, should extend over from four to twelve hours, according as the progress of the disease has been checked by the previous treatment or not.

2. That the disease continuing to make head after the pause, whether modified or not (if no suspension or change should appear desirable in conformity with the exceptions below stated), the same treatment should be resumed during the second period.

That during the second period in the *treatment of acute disease*, which is not of immediately *critical* character, the interval between doses should extend over from four to eight, or even twelve hours, according to the severity of the symptoms.

That, as a general rule, one, two, or three doses, according to the length of the intervals, will constitute the second period; the greatest number of doses agreeing with the shortest intervals.

3. That, in the event of no alteration, or, at most, a merely temporary mitigation of the symptoms, by the remedy or remedies administered during the *first period*, another remedy must be selected as closely analogous as possible to the symptoms present.

4. That, after the completion of the *second period*, in the event of the re-appearance of symptoms, which have yielded to the use of the remedy or remedies previously administered; the same remedy or remedies shall be administered at still more extended intervals.

That, in this after-treatment, the intervals between doses shall extend over from 12 to 48 hours.

#### OF CRITICAL CASES OF ACUTE DISEASE.

1. That *critical cases of acute disease*,—such, for instance, as of *cholera*, *croup*, or severe *inflammatory disorders*, which are excessively rapid in their issue, are not susceptible of the general rules applied to *acute disease*.

That the majority of these are *individually* exceptional.

That, in their critical acceptation, they are only susceptible of *one period* of treatment.

That, in cases of this nature, such remedies as *Arsenicum*, *Caprum*, *Digitalis*, *Lachesis*, *Sambucus*, *Hepar*, *Spongia*, and *Veratrum*, may be administered at intervals, varying from five to thirty minutes, according to the urgency of the symptoms, until beneficial reaction takes place.

That the *evident* (and *progressive*) decline of the vital principle, *notwithstanding treatment*, may, in such instances, warrant the change of the remedy, if there be any hope that the change may produce the desired reaction.

That, otherwise, cases of this nature are susceptible of the same exceptional conditions, as have been reserved for the previous class of complaints.



## OF CHRONIC DISEASE.

## GENERAL INITIATORY REMARKS.

In Chronic Diseases of a severe and obstinate kind, it is often very advisable to administer a dose of the remedy selected daily, the first thing in the morning (fasting), for a period of from four to eight days; or, in short, until such time as one or more symptoms become developed, which the patient had not experienced, before commencing to take the remedy. When the remedy has been properly selected, the change in the patient's state will commonly occur within or shortly after the periods just named. Should no medicinal manifestations of any kind become apparent, another remedy may be selected; from two to four days after the last dose of the previous remedy has been taken.

In chronic diseases, SULPHUR\* is very often the most appropriate remedy to begin with, if no other is better indicated, and particularly if the patient has previously been affected with any cutaneous malady (itch.) As soon as the symptoms developed by *Sulphur* have entirely subsided, a new medicament must be administered in accordance with the remaining symptoms (if any); but not for a longer period than from four to eight days. If improvement then sets in, the new remedy need not be repeated until the favorable change ceases to become progressively manifest. But, if no improvement ensues, although the remedy seems to be correctly chosen, *Sulphur* may again be resorted to, for from two to four days; and so on. It is frequently necessary to fall back upon *Sulphur* several times in this manner during a protracted course of treatment.

1. That there are two distinct periods in the course of treatment; the *first period* in which the medicine is more rapidly repeated to establish a medicinal ascendancy over the disease; and the *second period*, or that in which the treatment is resumed and continued to complete the cure, or till change of treatment.

These two periods are advantageously divided by a *pause*, during which the medicine may be suffered to exhaust its action and the variation of symptoms, etc., observed.

During the first period in the treatment of chronic disease, the intervals between doses should extend to about twelve hours, and

As a general rule, a course of twelve doses will constitute the *first period*.

The *pause* at the conclusion of the *first period* in the treatment of *chronic diseases*, should extend, for the vegetable remedies, generally, over from three to six days, according to the severity of the case, and the effect produced; and for such remedies as *Staphysagria*, *Conium*, etc., over from four to eight days; for the mineral remedies, generally, over from six to ten days; and for such remedies as *Calcareæ*, *Hepar-sulphuris*, *graphites*, *Silicea*, *Stannum*, *Sulphur*, *Zinc*, etc., from eight to twelve days.

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\* See, also, the article on "ERADICATIVE TREATMENT."



2. That the disease continuing to make head after the *pause*, whether modified or not (if no suspension or change should appear desirable, in conformity with the exceptions below stated), the same treatment should be pursued during the *second period*.

During the *second period* in the treatment of *chronic disease*, the intervals between doses should extend over from 24 to 72 hours, according to the severity of the case.

As a general rule, two, four, or six doses, should constitute the *second period*, according to the length of the intervals—the greatest number of doses agreeing with the shortest intervals.

3. That in the event or mere temporary mitigation of the symptoms by the remedy or remedies administered during the *first period*, another remedy must be selected as closely analogous in its properties as possible to the symptoms present, for further treatment.

That, after the completion of the *second period*, in the event of the re-appearance of symptoms, which have yielded to the use of the remedy or remedies previously employed, the same remedy or remedies shall be administered at still more extended intervals.

That, in this after-treatment, the intervals between doses shall extend over from two to six days.

#### CONDITIONS CREATING EXCEPTIONS TO THE FOREGOING RULES, RESPECTING CHRONIC DISEASE.

1. That the repetition of any medicine be suspended.

Upon the intermediate appearance of symptoms involving a complication not covered by the previous treatment.

Or, again, as soon as a positive degree of improvement becomes apparent.

To be renewed and re-continued upon the first indication that the *natural and original disease* is regaining its ascendancy, from which we may judge that the medicine has exhausted its active agency.

2. That another remedy must be selected as closely analogous in its action as possible to the symptoms present:

Upon the intermediate appearance of another symptom or symptoms involving a complication not covered by the previous treatment.

If no change, *take place, and the disease continue to gain ground progressively*, notwithstanding the administration of ten or twelve doses.

#### REMARKS AND REGULATIONS RESPECTING EXTERNAL REMEDIES AND APPLICATIONS.

Any remedy, which is prescribed for internal administration as HOMŒOPATHIC to a *local* affection, may be applied to the parts as a lotion, either by dissolving the globules in water, or by using the tincture, to mingle with the water.

EXTERNAL APPLICATION OF THE NATURE OF A POULTICE—The simplest and best application which can be used in cases requiring external treatment of this nature, to forward and encourage suppuration, or for

any other reason, consists solely of a piece of lint saturated with cold water, applied to the parts and kept constantly wet, the whole being carefully covered with *oiled silk* so as to exclude the *air*.

All medicated poultices should be avoided.

EXTERNAL APPLICATION OF THE NATURE OF FOMENTATION.—As a palliative application pending the salutary action of internal treatment in cases in which local irritation and tension are excessive, it is allowable to bathe the parts with *water moderately hot* by means of a piece of flannel; or to expose the parts to the action of the steam rising from *boiling water poured into an open vessel*. In cases of sore throat, in which the obstruction and burning sensation in the nostrils is excessively distressing, the patient may similarly inhale the steam of boiling water. Hop poultices and bread and milk poultices are good.

TINCTURE OF ARNICA.—This useful medicine, when employed as a lotion to wounds, should always be discontinued upon the appearance of any eruption, etc. Individuals, of what is ordinarily designated as an inflammatory habit, or who have very irritable skins, and are liable to be affected with erysipelas, must be very cautious how they use it, and must modify their treatment accordingly, and abstain from the application upon the earliest appearance of medicinal irritation or erysipelatous swelling or redness. Such patients should *invariably dilute the tincture with two-thirds more of water (in proportion)* than is indicated in the directions which occur in various parts of this work, when they have occasion to employ it; and, should this precaution not suffice to exempt them from excessive medicinal aggravation, they should have recourse to CALENDULA-OFFICINALIS as a substitute.

General proportions of the lotion . . . . . *Tincture of Arnica* 1 part, *to water* 6 parts.  
 Or for very susceptible subjects . . . . . *Tincture of Arnica* 1 part, *to water* 12 parts.  
 For the eye, or as a gargle for the gums after dental treatment . . . . . *Tincture of Arnica* 1 part, *to water* 20 parts.  
 For an infant under six months old . . . . . *Tincture of Arnica* 1 part, *to water* 32 parts.  
 For an infant over six months and under two years *Tincture of Arnica* 1 part, *to water* 20 parts.

TINCTURE OF CALENDULA-OFFICINALIS—may be employed in the treatment of wounds of every description, by those who, from constitutional causes, are unable to employ *Arnica* externally, without subjecting themselves to the inconveniences generated by the character of that remedy. *Calendula* has moreover an important advantage over *Arnica* in *very severe incised or lacerated wounds*, where there are indications of a serious scar being *otherwise* left by the cut. It is also preferable in all *severe wounds which cannot heal without previous suppuration*.

General proportions of the lotion—*Tincture of Calendula* one part, *to water* six parts: (for infants and children the same as *Arnica*.)

TINCTURE OF RHUS-TOXICODENDRON is more especially adapted to the treatment of SPRAINS, for the milder forms of which it is a specific remedy.

General proportions of the lotion—*Tincture of Rhus-tox*, one part, *to water* six parts: (for infants and children the same as *Arnica*.)

TINCTURE OF ACONITE.—Aconite has been used externally with great success for local inflammation arising from check of perspiration (or from

other causes), in conformity with its well-known characteristic properties. Care must be taken to distinguish such cases of inflammation, usually extending to the membrane which invests the bone, and affecting joints in particular, from erysipelatous inflammation, to which it frequently bears a striking resemblance. The sudden appearance of symptoms of this nature in young persons, who are particularly liable to accidents arising out of carelessness, etc., and who, at the same time, have no predisposition to erysipelas, may be a strong ground of assurance in respect to the character of such inflammatory action, which may further be explained by a brief inquiry into the previous circumstances. In such cases the external application of a lotion, composed of diluted Tincture of Aconite (simultaneously with the internal administration of the same remedy), by means of a linen rag saturated therewith, and applied to the parts, will speedily subdue the symptoms, and preclude more serious consequences.

General proportions of the lotion—for a person of adult age, *Tincture of Aconite*, ten drops to a wine-glassful of water. For a child under twelve years of age, *Tincture of Aconite*, six drops to a wine-glassful of water.

TINCTURE OF CANTHARIS OR CANTHARIDES.—The peculiar property which *Cantharis*, or Spanish blistering Fly, possesses of creating a severe burning pain, followed by the effusion of watery fluid beneath the scarf skin, bears so close an analogy to the effects of a BURN OR SCALD, with the formation of vesication or blisters, that we can readily conceive it well adapted, according to the homœopathic law, to be an admirable remedy for injuries of the like description, or attended with similar symptoms. *Cantharis* is, in fact, specific as an external remedy, in the treatment of burns or scalds, and is by far the most efficacious, if *applied immediately after the injury has been inflicted* (otherwise, see CAUSTICUM), and before the application of *cold water*, *acetate of lead*, or similar expedients have been adopted.

*Cantharis* is, however, objectionable for persons whose constitutional peculiarity renders them susceptible of erysipelatous tumefaction of the skin, in the place of blisters, from the effect of a burn or scald. In these cases, *Urtica-dioica* is specific. In some instances, although very rarely, the external application of *Cantharis* may produce deranged action in the urinary organs, (exemplified by suppression of water); in such cases the mischief is readily counteracted by the internal administration of one drop of *Tincture of Camphor* on a lump of sugar. The lotion should generally consist of the TINCTURE AT THE SECOND DILUTION and water, wherewith a linen rag is to be saturated, the linen being so wound round the parts as to exclude the air, and the moistening repeated as often as it becomes dry.

General proportions—three drops of the *Tincture of Cantharides*, 2d, to every teaspoonful of water.

TINCTURE OF URTICA-DIOICA, or URTICA-URENS—should be used in preference to tincture of *Cantharides* by those in whom a burn, or scald is apt to produce erysipelatous swelling in the place of blistering. But this is the only case in which *Cantharides* is superseded by *Urtica*.

General proportion of the lotion .....	<i>Tincture of Urtica-dioica</i> 1 part, to water 10 parts
For an infant under six months old .....	<i>Tincture of Urtica-dioica</i> 1 part, to water 20 parts
For an infant over six months and under two years.....	<i>Tincture of Urtica-dioica</i> 1 part, to water 15 parts

**PROOF SPIRITS OF WINE.**—In mild cases of BURNS or SCALDS, if *Spirits of Wine* can be procured immediately (otherwise, see *Causticum*), speedy relief may often be obtained therefrom, and often suffering avoided. Apply it warm to the parts (as hot as the patient can bear it), the injured part having meanwhile been exposed to the heat of the fire.

**CAUSTICUM or LIME WATER**, as already intimated under the head of *Cantharis* and *Spirits of Wine*, is a preferable remedy to either of the foregoing when an hour or two may chance to have elapsed before the use of any remedial application. The *Causticum* wash is also of much service in more serious burns, and in those of long-standing.

General proportions of the lotion—to every teaspoonful of water, add six drops of the *Tincture of Causticum*, and apply frequently to the parts by means of a piece of linen rag saturated therewith.

**RAW COTTON** (excepting when the suppuration is excessive, and the weather hot, for which case see *Soap*),—is highly useful as an external application to BURNS or SCALDS of a serious nature, and more especially when the injury extends over a large surface. The method of use is as follows:—Puncture any blister which may have arisen, bathe the sore well with tepid water, and then cover the parts with carded cotton or wadding in three layers—removing the *outer layer only*, and substituting a fresh one—when suppuration sets in.

**THE SOAP PLASTER** (*Pure, white, Hard-Soap*). This application is more particularly serviceable in cases of BURNS, where not only the *outer or scarf skin*, but also the inner or true skin has been destroyed. In serious cases, which have previously been treated with the *lotion of Cantharides*, or *Urtica-dioica*, and in which the inflammation and pain have yielded to these remedies, but which are too severe (owing to the injuries inflicted on the *true skin* and *adjacent muscles*) to heal without suppuration, the soap plaster is a very useful accessory. It should be made and applied as follows:—Moisten the soap with tepid water, and make a thick lather or paste, and spread it upon linen; then puncture any blisters which may appear on the exposed surface, and remove all loose skin. After these precautions, apply the plaster to the parts, and secure it by means of a bandage, being careful that the whole of the injured surface is covered with the plaster. As a general rule, the plaster may remain undisturbed for twenty-four hours, when it should be gently removed and changed; but there are many exceptional cases, and the feelings of the patient should guide us in the removal and change of the plaster, *whenever a return of pain is complained of*. This course of application should be continued until the injured parts are completely healed.

*The application of the plaster will always be attended with increased pain at first; but this must not deter us from the employment of it, as it will soon be followed by marked improvement.*

**FLOUR**—may be used as a substitute for cotton or the *soap plaster*, when neither of the latter can be obtained at the moment. The method of application is simply to sprinkle the flour copiously over the injured



parts, after having taken the precautions directed to be observed under the heads of *cotton* and *soap plaster*. When it becomes necessary to remove the dry paste formed by the incrustation of the flour, this should be gently effected by first moistening and loosening it, by means of *poultices* (as directed under the head of *external applications of the nature of a poultice*),

TINCTURE OF ARSENIUM (at the third dilution),—applicable to bed-sores, and as a local resource, in many cases, of malignant ulceration.

General proportions of the lotion—to one wine-glassful of water, ten drops of the Tincture.

TINCTURE OF CARBO-VEGETABILIS (at the fifth dilution),—in similar cases, as directed for the affection in question.

General proportions of the lotion—to two table-spoonsful of water, twenty drops of the Tincture.

TINCTURE OF CINCHONA (concentrated). See “BED-SORES,” after typhus, etc.

General proportions of the lotion—to a wine-glassful of water, fifty drops of the Tincture.

#### REMARKS AND REGULATIONS RESPECTING THE BATH.

The bath may be divided, according to modern appliances, into eight varieties, viz:—the HOT and cold salt-water bath, the hot and cold fresh-water bath, the tepid, the shower, the vapor, and the medicated baths. Of these we shall here consider the two first-named only, viz.

#### THE COLD SALT-WATER AND THE COLD FRESH-WATER BATH;

Except as respects new-born infants, for whom a third variety is necessary, namely:

#### THE HOT FRESH-WATER BATH.

All the other varieties, especially medicated baths, are commonly prohibited.

The consideration of the bath is a matter of essential importance to health, and has been acknowledged as such, from the remotest antiquity, and in every climate. It is almost as much a necessary of existence as food and clothing. It involves what is a primarily essential, *cleanliness*; but, like all generalities, it is subject to exceptional modifications arising out of the condition of the system, or the temporary state of the body; such, for instance, as the presence of an eruption or rash, or the exudation of perspiration after violent and prolonged exercise, both of which would render the bath obnoxious for the time. But for persons who are free from any morbid manifestation which may render the free use of cold water objectionable, nothing, perhaps, will tend so much to brace the nervous and muscular construction of the frame, and to preserve the sturdy physical power of youth in advanced age, as the regular observances of the bath.

#### GENERAL EXCEPTIONAL CONDITIONS UNDER WHICH COLD BATHING SHOULD BE AVOIDED.

When (as is sometimes the case) it is found to induce constitutional disturbance, or is invariably followed by headache, etc., of the same character.



When it is followed by *fading chilliness* instead of the *glow* which indicates its healthy action.

There are comparatively few instances in which the *cold fresh-water* bath disagrees with persons in good health; in such instances, however, when they occur, the use of a sponge or wet towel must be substituted for the bath, and should be followed with brisk friction.

When any inflammatory action is present, or when from exertion or from any other cause, the skin is moist and the pores are open the *Cold Bath* should be avoided.

During the presence of headache, *other than headache arising from irregularities of digestion or nervous causes.*

Immediately, or within one hour *after a meal.*

Before any meal has been partaken, or, in other words, upon first getting up in the morning.

Generally—with a *declining* temperature, as, for instance, late in the evening, when the temperature of the water will not have declined equally with that of the atmosphere.

When the atmospheric temperature is not sufficiently high, as compared with that of the water; or, in other words, when the water *feels warm* and the *air cold.*

Generally—during the prevalence of cold east winds.

#### GENERAL CONDITIONS UNDER WHICH COLD BATHING IS BENEFICIAL.

When the temperature of the water, relatively to that of the atmosphere, is as nearly as possible that which it would reach and maintain, by being constantly exposed to the action of the same atmospheric temperature.

When it is always followed by a glow.

In affections of a purely nervous character.

In the majority of affections resulting from debility of the digestive functions.

During an *ascending temperature*; that is to say, in the earlier part of the day, generally about *two or three hours after the first meal*, and at an equal distance from the second.

When the water is *cold compared with the air*, but not so cold as to produce a shock or numbness.

In this climate, from the end of June to the middle of September, may be stated as the best season for *out-door bathing.*

*In-door bathing*—may be continued throughout the year with great advantage, with the precaution that the thermometer in the apartment stand at from 50° to 60° of Fahrenheit, and that the water be exposed to this atmospheric temperature at least six hours (when that is possible) or be raised to from 45° to 55° degrees, if below it.

The *swimming bath*, or bath in which (if not in open water) there is room to exercise the limbs, is preferable.

## GENERAL PRECAUTIONS TO BE OBSERVED IN BATHING.

Do not bathe the lower extremities first. The immersion should be complete at once.

This need *not* be effected by *plunging*, when, as is not unfrequently the case, such a method is found to induce headache or temporary deafness.

*Diving*—which is a very common amusement, is very often prejudicial without sufficient attention being paid to the fact. In general, you should abstain from *diving*.

Never leap into *deep* water, *feet foremost and in an erect position*. The best method is to drop into it, *the body and limbs being bent together*.

Do not stand still or remain motionless in the water.

Do not remain too long in the water. Five minutes is quite long enough to derive all the advantages of the bath.

Never remain so long as to become thoroughly chilled.

Leave the bath upon the first appearance of cramp.

Apply a coarse towel, briskly, all over the body, as soon as you leave the water; and take pains to dry yourself as *thoroughly* and as *expeditiously* as possible.

Dress as soon as you are thoroughly dry.

The bath should be followed by a brisk walk, but not sufficient to heat you.

## THE SALT-WATER BATH OR SEA-BATHING.

There has been a popular notion that *sea-bathing* is always preferable to *fresh-water* bathing. Nothing can be a greater mistake, and there are a far greater number of exceptions to the proper use of the former than to that of the latter. It is indeed true, that the question of temperature is far less important in respect of sea-bathing, except, indeed, towards the fall of the year, when the temperature of the atmosphere, in our climate, becomes considerably depressed,—and when, in conformity with one of the “*general exceptional conditions*” above stated, it were advisable for those, even with whom sea-bathing generally agrees, to discontinue it.

But it is a matter of experience that there are a great number of *constitutional exceptions*. And it is quite as important that all those with whom sea-bathing is found habitually to disagree, should abstain from what, at certain seasons and in certain places, may be a great indulgence.

There are instances in which *sea-bathing* produces a species of nausea similar to that of *sea-sickness* in persons who are totally exempt from this inconvenience on ship-board. This, then, is clearly a constitutional exception.

In brief, however, it may be laid down as a rule, that when sea-bathing *habitually* induces *any* kind of constitutional disturbance, it should be *avoided*.

## THE FRESH-WATER BATH.

The instances in which *fresh-water bathing* disagrees, may almost be summed up under the head of the “*General Exceptional Conditions*”

above stated. The cases of *constitutional exception* are far less numerous than those which occur with respect to *sea-bathing*, and there are fewer cases still in which persons who cannot bear *fresh-water* can tolerate the *sea-bath*. When, however, they occur, they should indicate the course of the patient.

#### TEMPERATURE OF THE BATH FOR INFANTS.

THE WARM BATH, which is requisite for the treatment of *newly-born* or *very young infants*, should never exceed 98 degrees of Fahrenheit in heat. It should in general range from 92 to 98 degrees, according to the effect produced on the child. When the bath is used as a remedial agent, it is important to *maintain* the temperature at which the immersion had taken place; and it will, therefore, be desirable on all occasions to have a thermometer within, so as to detect and regulate any variations.

THE COLD BATH should be, as nearly as possible, of the temperature at which the atmosphere would place or keep it. It is, therefore, desirable that cold spring water, which has not been exposed to the action of the air, for four hours at least, should be avoided in hot weather, when the atmospheric temperature would have materially increased the heat of it.

*Exceptions to the use of the cold bath.*—In almost all cases the use of the COLD BATH, with new-born or very young infants, is reprehensible.

#### OF PREVENTIVE AND ERADICATIVE TREATMENT.

It is too true that the every-day practitioner suffers himself to be too completely engrossed by the actual condition of disease to investigate or to provide against its accessibility. The duty, however, of every man who deals with his profession as a noble and humane science, is rather to point out the method of preventing the occurrence of active disease, and of eradicating (if possible) the latent and slumbering defects of constitution, which may be described as dormant disease, than to confine his attention solely to the treatment of its active manifestation.

This great and humane purpose should characterise the philosophy of every medical creed or denomination, and should ennoble, if it may not consecrate any system.

By the term Eradication, I wish to be understood to allude to the method of modifying or removing such unhealthy conditions of the system as necessarily predispose the subject upon whom they operate as particular developments of active Organic Disease.

I would first, however, be understood to confine myself, here, to such general hints as may, with due consideration of the regulations hereafter laid down for the treatment of each Disease as it occurs, enable the non-medical reader to form some idea of the mode in which the rule is capable of being applied in the majority of individual cases, because it is obvious that this subject alone might require the whole space of more than one of such volumes as this, ere it was considered in detail.

I would also hint that the rule is so distinct and positive, that the appropriate PREVENTIVE TREATMENT of any Disease may be readily in-

ferred from the distinction of the medicines which are SPECIFIC (that is of positively analogous properties) in its TREATMENT.

### PREVENTIVE TREATMENT GENERALLY.

In respect to the Prevention of Disease, men of all medical creeds who have devoted their time and toil to the consideration of the subject, hold opinions which are necessarily in accordance to a certain point; that is, as regards the modification or removal of the *external and exciting* causes of disease, such as local or general climate, and the substitution of cleanliness, pure air, drainage, etc. There is, however, a limit to the concurrence of opinion, even on some of these points. We are further agreed as regards some of those causes which proceed from irregularities of living, from excesses, and also from improper or insufficient food.

Amongst these accessory measures, which are essential to the prevention of disease, I would, therefore, particularly draw the reader's attention to the following,—involving, first, those which concern the *person* immediately; and, secondly, those which concern the *locality* immediately, and the person indirectly.

Those which concern the *person*, immediately, amongst others, are:

1. *Exercise*, in proper relation to the habits of the individual, to his strength and capabilities of physical exertion, the state of the weather, the method of taking exercise, whether active or passive, (the latter being rather a modification of the accession of pure air than an application of exercise properly so called), and the circumstances of climate—involving the degree of altitude, or depression of temperature, the time of the day, (the evening being very adverse to health, especially in districts in which thick vapor, lying close to the ground, is observable at and after sunset, marshes, etc.), and the nature of the atmosphere at the time—whether unduly charged with or deficient of moisture, or again, whether any particular wind prevail, which is known to be charged with noxious exhalations, as the Sirocco of Southern Europe, etc.

2. *Cleanliness* of person and habitation, which is subject to no exceptional condition but those—of rare occurrence—which render it impossible. This action may also involve the free use of (cold) water in ablution, except in particular cases.

3. *Ventilation*, partly applicable to the person, and partly to the locality, by which I understand the admission and free circulation of pure air, without the action of a direct current or draught, and the avoidance of closely confined apartments, sedulously closed against the external atmosphere. In ninety-nine cases out of a hundred, such exclusion would repulse, more probably, a restorative of health, than an aggravant of disease. For Nature is more surely in accordance with the requirements of human life, than any artificial means; and Science should be rendered not a *repellant*, but an *assistant* of NATURE.

4. *Apparel*, by which should be understood all coverings,—which should be as light as possible, consistently with weather, climate, and particular susceptibilities, or habits. The action of the skin is one of the



most important functions of life, inasmuch as if irregularly performed, it reacts upon all or any of the organs most intimately connected with existence. Over-clothing or covering, on the one hand, therefore, may promote an irregular excess of action, which will result either in continued relaxation of the function, and consequent exhaustion; whereas exposure, on the other hand, may occasion a repression and suspension of action which will inevitably recoil upon the superior organs. The strict consideration of this question is more especially imperative in climates in which the transitions of temperature are *sudden*, or *very considerable*.

5. ALIMENTS,—by which I here understand both food and drink, should in every case be modified, in relative proportion, according to the climate, and to exceptional conditions arising out of the particular degree of *strength* or *weakness* of digestion, which characterizes particular persons or to any casual circumstances which may modify, alter, or deteriorate the digestive functions, and consequently operate upon the appetite. The American native, or the habitual inhabitant of a temperate climate, removing into a tropical zone, should decrease (if not totally eschew) the admixture of animal food, or, if removing into an arctic or very cold climate, might, with due regard to condition (especially whether salt or fresh) of such animal food, advantageously increase its proportion;—the habitual use of very salt or otherwise highly seasoned food, is always uniformly prejudicial;—he should also diminish the proportion of stimulating ingredients as the heat of the climate is increased;—under the same conditions he should strictly abstain from the use of stimulating liquor, or if that has previously been *habitual*, he should decrease it gradually, until very moderate indulgence (if any) remains;—and he should be very careful not to overload the stomach with either food or drink of any kind. It is very important that the American, transplanted into a tropical climate, should neither eat nor drink more than what is absolutely necessary,—inasmuch as every disease to which the inhabitants of temperate zones are subject between the tropics, not only assumes complications particularly implicating the organs of digestion, but very frequently springs either remotely (by predisposition thus occasioned) or immediately from impeded or overtaxed digestion. The person of weak digestion should carefully abstain from all indigestible or stimulating articles of food,—should select the plainest diet,—feed to supply the necessities alone, and not to gratify the palate,—should eat but little at a time, and not at all as the time of rest approaches,—should avoid all stimulating food or drink, and should never attempt to *force an appetite*. Regularity is indispensable to the health.

6. THE HABITS OF LIVING.—Regularity is a great preservative in this respect, including the just appropriation of the period of rest, as indicated by the secession of light and the dormancy of nature generally, and consequently early hours, both in resting and rising, and a sufficient but not excessive proportion of rest. The relations of night and day constitute the best directions for the equable adjustment of the due proportion of rest. The summer of temperate zones indicates a less proportion than the winter, as also the tropical night and day indicate a greater equality



in the disposition of time. (See also, "Rest," under "Investigation of Disease.") Excessive disposition to rest (indolence) is as injurious, on the one hand, as excessive duration of mental or bodily activity; and the regular return of both conditions, at corresponding and stated hours, is important. Regularity of habits also includes regularity in the period of eating or the hours of meals, which is no less important than the former. The art of dividing time in every way is a *powerful preservative*.

The preventive measures, which involve locality amongst others, are:

1. DRAINAGE.—If the locality be subject to periodical, irregular, or casual saturation or flooding of water; that is, if it be nearly on a level with some adjacent surface of water, such as lakes, rivers with sluggish current or the sea, the generally applicable methods of preventing the exhalation of noxious vapors, and the consequent impregnation of the atmosphere with miasma injurious to life, are (1) to create artificially, where practicable, such channels as shall lower the general level of the water, or comparatively elevate the general surface of the soil, and which shall prevent the stagnation of waters; and (2) so to disturb the surface of the soil, as by furrowing, ploughing, etc., that the exhalations shall be rapidly emitted, and thereby be subject to dilution and dispersion, as soon as they transpire.

Or, again, and especially to towns and crowded districts, in which the accumulation of decomposing or decomposed animal and vegetable matter must necessarily be great, to create so free a vent by means of proper subterranean canals, and by the removal of all filth, etc., (exposed to the action of the atmosphere), that any such matters shall be rapidly discharged into such currents as shall remove impurities rapidly, or into such remote receptacles as shall secure the absorption, dilution, or dispersion of all noxious vapors before they can impregnate the habitual atmosphere of the inhabitants. Wherefore, every dwelling, to be wholesome should be accessible to the free passage of natural currents of air, and should be provided with an *ample and wholesome supply of water*, and an easy discharge for all refuse deposits.\*

2. *Modifications of climate*, by clearance, tillage, and every other result and accompaniment of *industry*—which thereby produces a doubly beneficial result (1) by removing the susceptibility of the inhabitant to disease; and (2) by removing the cause which too frequently generates disease, viz., the unhealthy exhalation of the soil.

3. *The choice of habitation* as to site, which should be removed as much as possible from particular geological influences; from localities in which the water is impregnated with mineral substances, as lead, iron, etc., from particular (local) and injurious currents of air, as in certain valleys; from the midst of woodland (and a sufficient clearance should be effected); from the adjacency of stagnant waters, and, lastly, *above* the

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\* Vested interests, stolid indifference, and an indolent disinclination to listen to the voice of reason, too often oppose a formidable barrier to the removal of crying nuisances. If there were any one act of *despotic* government interference more capable of defence than another, it would be one which was directed towards effectual sanitary improvements.

level of the mist or vapor, which consists doubly of the precipitated and of the continued exhalation from the soil, and which is readily distinguishable—in marshy districts especially—by the dense white fog, which lies like a separate atmosphere, an elevation of a few feet above the flat soil, after sunset.

This subject has lately attracted much attention in the more populous countries, and is, therefore, of particular import to the *colonist* who may have to select the site of his own habitation.

#### HOMŒOPATHIC MEDICINAL PREVENTIVE RESOURCES.

No medicine, unless its action upon the human organs be analogous to disease, can be really, truly, and invariably PREVENTIVE. The preventive measures, as regards the employment of medicinal agents, consist, in the repeated administration, usually in somewhat large doses, at intervals approximately of twelve hours, of one or more of such remedies (for alternation is occasionally requisite), as most closely assimilate in their specific action, and according to the indications stated for their selection in the case of each particular disease, or which, in combination, by alternate administration, most completely embrace the distinctive characteristic features of disease, when it assumes an epidemic, or even a local prevalence. The first point is, therefore, to refer to the article hereinafter devoted to the treatment of such particular disease, whereby to ascertain the principal remedies quoted, whether any, either singly or in combination (by alternate administration), are described as direct specifics, and then compare that remedy with all the symptoms by aid of the "REPERTORY."

If, under the head of the particular disease, one or more remedies, under certain circumstances, and qualified by the presence of certain symptoms, are announced direct *specifics*, they will, doubtless, when early employed, be the unerring preventives or modifiers of the disease. Such, for instance, as *vaccination* against smallpox, which should be repeated, if many years had elapsed since the former operation, or which should not fail to be resorted to by those who have not been previously vaccinated:—*BELLADONNA* against Scarlet Fever *CHINA* and *LOBELIA* (chiefly) against Marsh Intermittent Fevers:—*MERCURIUS-CORROSIVUS* against Dysentery, especially *red* Dysentery; *Bryonia* and *Rhus-toxicodendron* and *Arsenicum* against some varieties of typhus; *Cuprum-aceticum*, camphor, and veratrum, against Cholera and Diarrhœa respectively, or against excessive and sudden relaxation, with spasmodic pains and cramps when the diseases just named are prevalent; *Aconitum* and *pulsatilla* against measles; *Aconitum*, *belladonna*, and *hyoscyamus*, in cases and in particular localities in which Inflammatory Fever, with prominent affection of the brain becomes prevalent, and similarly occurs amongst numbers of persons at once; *Bryonia* in cases and in particular localities in which inflammatory fever, with prominent derangement of the stomach, appears; *Carbo-veg.*, etc., against Scurvy (see also "Eradicative Treatment,"); *Sabina* and *secale*, etc., against imminent Miscarriage (see also "Eradicative Treatment," for cases in which this casualty becomes habitual); Camphor against severe colds (influenza), when they are what is termed going through the house. In fact, every remedy, as ap-

plied to the treatment of a particular disease, after it has set in under a particular aspect, is equally applicable to the preservation when the current complaint bears a similar stamp.

THE DOSES—of Preventive remedies should usually be repeated at intervals of about twelve hours, until a degree of medicinal action has set in, when the course may be considered complete; but the action thus excited must be watched, lest it should occur that the prevailing disease (in a modified degree) has supervened.

#### ERADICATIVE TREATMENT.

No cure can be complete, where there is a latent constitutional taint, without proper ERADICATIVE TREATMENT. SCROFULA, in one shape or another (or complicated with other diseases), may be considered as the predisposing cause of susceptibility to the *recurrence* of every disease—that is, as the great parent of disease, and the most common source of the malignity and fatality of other diseases, when not itself the fell destroyer.

Eradicative Treatment is applicable to the removal or subjugation of defects in constitution, habit of body, or temperament, which operate continually, not only as the predisposing causes of every prevalent disorder, but also as the complicating accompaniment of every disease; or, on the other hand, which resolve or threaten to resolve, themselves into organic decay, by attacking one or more of the important organs of life, especially. Eradicative treatment is also applicable to the extirpation of those slow, latent, or occasionally more active chronic diseases which are gradually sapping the constitution, and which would otherwise finally result in general disorganization, but which have not hitherto permanently destroyed the functions of any important organ of life.

The space, which is necessarily confined in a work of this kind, will not admit of great detail, nor, indeed, could a whole volume such as this exhaust the subject, if compressed within the narrowest compass. We have the intention, therefore, of confining our remarks to such general relations as may afford *some idea* of the mode in which the treatment is conducted, subject to the regulations severally laid down under the head of EACH DISEASE (in the subsequent parts of this work), or, as it would then appear, in the character of a *symptom, development, or manifestation of a more deeply-seated diseased condition*—in conformity with the nature of the PARENT DISEASE.

The reasons for suspecting, and the grounds for ascertaining the existence of such PARENT DISEASE, will be gathered from the article on “The Investigation of the Patient,” particularly if due regard be paid to PARENTAGE (including near relations—uncles or aunts); to the part or organ most susceptible to the action of morbid influences, transitions of climate, the nature of the locality generally inhabited, the diseases which most frequently affect the patient, and the inveterate or peculiar or dangerous form, which all maladies, affecting the patient, assume. Of these, the question of parentage and near (blood) relations involves the most important and weighty considerations, as thence we may derive the origin of SCROFULOUS habits of body in all their varieties of combination, complication, and development.

Indeed may not improperly attribute every FAMILY defect of constitution, or every manifestation of a latent constitutional taint which appears with greater or less intensity in several, or pre-eminently in one\* of the members of a family, to an unwholesome or scrofulous inheritance. Thus to SCROFULA we may attribute, amongst other derangements: Rickets, or enlargements and curvatures of the bones, and decay or exfoliation of the bones resulting from comparatively trivial circumstances; chronic disease of the skin, or extreme susceptibility to the development of morbid appearances of the skin, of an *endless* variety, or especially to eruptions of the nature of tetter, to ringworm, etc., etc.; imperfect construction of the brain; and IMBECILITY, or prevalence of susceptibility to derangements of the mind, especially if complicated with glandular swellings or their cicatrices; torpid, or usually painless ulcerations, frequently characterized by a degree of putrescence, and commonly discharging a thin, watery, corrosive fluid; or which, if somewhat quickly dried up in one part are usually developed in some other; affections of the Lining Membranes, in general (as of the stomach and bowels, air passage, etc.); habitual or long-continued discharges of thin, watery fluid from any parts as the result even of very slight causes of irritation, manifesting a deficiency of vigor in the membranes, to which may also be appended obstinate or continuous Whites, and chronic discharges from the Ears; chronic Inflammatory affections of the EYES and EYELIDS, qualified by discharge of very adhesive gum, and continual adhesion of the lids in the morning, by excessive susceptibility to the action of currents of air, or to irritation by reading, by excessive or even continual flow of tears, or susceptibility to watery eyes, by excessive sensibility of light; or, again, habitual susceptibility to Styes; chronic Inflammatory and Suppurative affections, or chronic *enlargements* or *indurations*, of Glandular parts in general: as, for instance, of the neck and under the jaw, the groin, the armpits, etc.; or ABSCESES; chronic enlargement and habitual hardness of the Belly; the prevalence of water on the Brain, water on the Chest, dropsy of the Belly, or general Dropsy in more than one member of any family: the like of what is called Tubercular consumption, or of organic affection of the Mesentery, or of unaccountable Emaciation and gradual decline; WORMS, when they are evidently generated in consequence, not of casual circumstances, but of an inherited defect of constitution.

THE ACCESSORY MEANS adapted to the eradication or modification of Scrofula, are, amongst others:

1. DIET—the most important consideration of all—which should be always as nourishing, in relation to its bulk, as much compressed or reduced in bulk, as light and easy of digestion, and as regularly administered

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\* Parents (or a parent) possessing the semblance of sound health, may yet carry the germs of scrofula in the system, and consequently be capable of transmitting the disease to the offspring, hence the necessity for inquiry into the health of blood relations. Again, although there may not be any hereditary taint in the family of either parent, the capability of giving a scrofulous constitution to the offspring may be acquired by too early or too late a contraction of marriage, by disproportioned marriages (as to relative ages), by parental excesses, etc., and by any cause which may tend to injure the constitution of one or both parents—as improper or insufficient food, impure air, etc. Lastly the germ of scrofula may be transmitted to an infant by the milk of a scrofulous or otherwise diseased nurse.



as possible—sometimes frequently, but in small quantities at a time. An equal proportion of animal and vegetable food, or vegetable food prepared with a fair proportion of the pure gravy of sound and wholesome meat. Roasted meat in preference to any other—especially mutton and beef. EGGS, when found to agree, lightly boiled (soft), and eaten with a fair proportion of good, *home-made, stale*, wheaten bread, but not in combination with other ingredients. Sometimes milk (when it does not disagree, as is sometimes the case in particular instances). Of *beverages* water is the only fluid which is universally safe. *Stimulants* of all kinds should usually be strictly avoided.

2. AIR is second only to diet in the treatment of scrofulous habits; pure country air, in a healthy, dry, rather elevated situation, *not* exposed to the prevalence of *bleak* winds:—free access and circulation of air within doors, in all apartments inhabited, and particularly in the sleeping room; as great a proportion of the day-time as possible, without severe fatigue, particularly in fine or favorable weather, should be spent in the open air.

3. EXERCISE should be as free and unrestrained as is consistent with the avoidance of excessive fatigue, or any of its consequences, and with due precaution that check of perspiration does not occur; no person should remain uncovered, or even *still* for some time after strong exercise; proper protection of the skin from the arrest of transpiration and gentle motion are indispensable; nor should strong exercise in the open air be resorted to in extreme conditions of temperature, and especially when there is great moisture in the ground, and consequently much exhalation. But when exercise cannot, owing to extremely unfavorable weather, be consistently obtained *out* of doors, it should be sought *in* doors. With these, and other like precautions, active sports, appropriate gymnastic or calysthénic exercises, and every such occupation as calls the muscles and sinews into play, will go far to promote a vigorous operation of all the organic functions.

4. WATER, used not only in the sense of ablution or cleansing, but for the purpose of promoting a healthy action of the skin. The *cold fresh-water bath* should be used daily (in the absence of particular reasons for abstaining), either *in* doors or *out* of doors according to circumstances, with due regard to the precautions mentioned under the head of the “Bath,” and to the habitual temperature of the body (which at the time of bathing should, if possible, neither be above nor below the natural standard) and with careful observance of the process of brisk friction afterwards, and of avoiding permanent chill. Washing and rubbing the body, especially the chest, stomach, and neck, daily, first with a coarse wet towel, and then with a coarse dry one, will frequently form a good substitute for the bath.

5. CLEANLINESS of person, dwelling, clothing, bed clothes, etc., is imperative. If it be possible, the clothes, both of the person and bedding, should be frequently changed; the bed itself, even, should be frequently emptied, purified, and replaced, feather-beds being wholly objectionable; and the greatest precaution should be observed against the use of damp apparel or bedding.

6. HABITS OF REGULARITY, mental, moral, and physical, should be strictly observed; excesses of all kinds are prejudicial; mental or moral excitement should be as much as possible avoided; the habitual observance



of duties, as tending to obviate irregular habits on the one hand, and evil consequences on the other, is not to be overlooked; a proper degree of mental and physical occupation, without either undue physical exhaustion or excessive mental application, and above all in a methodical and regular manner, is indispensable; a proper proportion, without excess, of rest, or *without indulging an indolent disposition*, is to be enforced. (See "Investigation of the Disease," part "Rest"). Regular hours, and hours consistent with the *natural* division of night and day, should be observed, and the contrary strictly avoided; gloomy thoughts should, as much as possible, be dispelled by averting the attention to interesting occupations, but *not* by recourse to excitement; frequent change of scene is often very advantageous to those who have means to procure it, but this should be understood of changes which do *not* occasion great excitement.

### HOMŒOPATHIC MEDICINAL ERADICATIVE RESOURCES.

In cases in which an inherent defect of constitution either provokes the development of particular diseases, or appears in complication with them, we not uncommonly find that *remedies which in every respect correspond with the symptoms, and which would, under other circumstances, operate as specifics, are repeatedly administered without the least apparent effect*. The reconsideration of the symptoms having more than once confirmed our selection, we should turn our attention to more deeply-seated causes which are present to thwart us. It is obvious that the presence of inherent constitutional defects may occasion external appearances in disease, which are especially susceptible of erroneous inferences, and, therefore, *without this very important clue*, the special directions for the treatment of any particular disease may frequently tend to discourage the unprofessional reader.

In every case of disease, therefore, in which a remedy, after repeated reconsideration and *ineffectual* administration, is still apparently homœopathic, or analogous to the manifestations present, I would beg of the reader to investigate very closely all details of parentage, antecedent circumstances, etc., (as above stated), in order to ascertain the indication of inherent *taint*, whether strikingly apparent or extremely remote and obscure, and as far as in him lies, to make a judicious selection from ERADICATIVE REMEDIES, such as SULPHUR, which is especially appropriate when there are chronic affections of the SKIN:—*Calcarea-carb*, when the GLANDS, in general, are particularly affected; *Mercurius*, when the BONES are prominently involved, unless this be traced immediately to abuse of mercury, in which case *Nitric-acid* will be particularly useful, or perhaps *Hepar-sulphuris* may be required: or again, *Mercurius*, when the SALIVARY GLANDS are especially involved, saving under the exceptional condition just named: *Carbo-veg*, against what are termed scorbutic complications: *Sabina* and *Secale* occasionally, generally, however with an occasional course of *Sulphur* against predisposition to miscarriage. These are only to be considered as a few general suggestions; but I would further add, with respect to

SULPHUR—that repeated occasions in which I, in common with many other homœopathic practitioners, have employed this medicament

under the circumstances above detailed, and when the remedies seemingly appropriate to the external evidences of disease had signally failed, have confirmed its pre-eminent utility. Very often, after the patient had been submitted to a few doses of *Sulphur*, the dormant susceptibility of the system becomes awakened, and a subsequent return to the particular and appropriate remedy which had hitherto failed, has been attended with the most decided benefit. In cases in which the constitutional taint is deeply seated, or very virulent, a long course of such alternations becomes necessary, continually returning to one or more doses of *Sulphur* when the effect of other remedies becomes less apparent, and again employing the intermediary remedies, or those appropriate to special indications as before, if still required. In many cases it is either highly beneficial or absolutely necessary, *in treating chronic diseases* of all kinds, to commence with a consecutive course of *Sulphur* in *single daily* doses, continuing for a week or ten days, or until a more or less *distinct degree of medical action* had set in; then pausing for about four days to watch the subsidence of such medicinal action, or to detect any *particular* symptoms requiring an intermediary remedy, or, sometimes *suspending* treatment for several days, or even weeks.

These variations of treatment must be subject to the discretion and judgment of the administrator, because *no two cases are strictly analogous*, and, therefore, a *rule* would be merely one of many *exceptions*. So long, however, as greater activity of the skin, etc., is manifest after a course of *Sulphur*, it will be advisable to pause in the administration. If there be intermediary and distinct symptoms not appertaining to *Sulphur*, but identifying a special remedy, it should be given till such particular symptoms are subdued. Or, so long as general improvement makes steady progress, however slow, it will be advisable to abstain from repeating the doses of *Sulphur*, resuming the administration, however, immediately the malady becomes stationary or retrogressive. If *acute* or *active* disease has supervened, and yielded under the influence of intermediary or special treatment, we are *not* to consider the *cure complete*, but should return to extended courses of *Sulphur* at *remote* intervals. By persevering in such treatment, the most obstinate chronic diseases, short of actual organic decay, are overcome; and even if actual organic decay has set in, we have frequently found means to arrest its progress, and to prolong existence, and even comparative health for a surprising length of time.

THE DOSES.—As a general rule the recurrence of the administration should take place once in twenty-four hours, namely:—the first thing in the morning, *fasting*. The quantity should be sufficient to develop slight medicinal action, which is usually essential to the eradication of deeply-seated disease; but avoid the error of plunging into extremes. Eight pills, daily.

GENERAL CONDITIONS AND INJUNCTIONS respecting eradivative treatment. It is natural that the vigor of animal as of vegetable life is in the ascendant in the spring, and in the decline at the fall;—it, therefore, follows that the spring will be the season in which eradivative resources, backed by the greater buoyancy of the vital energy, will be most successful. I would also strongly enjoin every person who has occasion to under-

take the treatment of disease characterized by conditions of the nature above detailed, above all things *not* to be *discouraged*, but, so long as all circumstances *correspond* to *identify* the accuracy of his treatment, to persevere steadfastly, assured that, especially if the patient does *not* lose ground, he is pursuing a course towards *ultimate success*.

When a mother has given birth to one or more sickly children, she ought to undergo a course of constitutional treatment forthwith, even though she may again have fallen into the pregnant state. In the latter case, however, somewhat more than ordinary caution is required in watching the progress of treatment.

## SYNOPSIS OF THE RULES FOR DIET UNDER TREATMENT.

### ALIMENTS ALLOWED.

*Soup or broth* (in special cases of illness or indisposition) made from the lean of beef, veal, or mutton; to which may be added well-boiled sago, tapioca, vermicelli, rice, semolina or macaroni, pearl-barley, and sometimes carrots, young peas, or cauliflower, seasoned merely with a little salt.

*Meats and animal products.* Mutton, beef, lean pork, of good quality, in a few *exceptional* cases in which it is known not to disagree (poultry rarely, except in particular cases), pigeons, larks, rabbits, (venison, and game in general, may, if tender, in most cases be partaken of in moderation, but never when high) plainly cooked and roasted, stewed or steamed, in preference to boiled; further, soft-boiled eggs, good fresh butter and curds.

*Fish (occasionally).* Soles, whiting, smelts, trout, cod, haddock, mullet, perch, turbot, oysters and flounders, boiled, in preference to fried; when cooked in the latter manner, the white must alone be partaken of and the outer or fried portions rejected.

*Vegetables.* Potatoes, brocoli, green peas, cauliflower, spinach, mild turnips, carrots, parsnips, French beans, beans, seakale, vegetable marrow, stewed lettuce, well cooked, and prepared with the gravy of meat, where required, instead of butter.

*Condiments,* Salt and sugar in moderation.

*Bread.* All kinds of light bread, not newly-baked; and biscuit, free from soda, potash, and the like ingredients.

*Light puddings,* such as those made from vermicelli, semolina, corn starch, sago, arrow-root, rice; macaroni (without cheese), simple cakes, composed of flour or meal, eggs, sugar, and a little *good* butter.

*Fruit.* Baked, stewed, or preserved apples and pears; also gooseberries, raspberries, grapes or any other fruit not of an acid quality, fully ripe, preserved, or in the form of jelly, may occasionally be partaken of.

*Beverage.* Water, toast-water, sometimes milk, milk and water, cocoa, chocolate (unsuiced), arrow-root or gruel, made thin, barley-water, sugar and water, rice-water, and weak black tea in cases where it has long been taken habitually, and has not been productive of injurious effects.

*Salt* should be used in great moderation.

## ALIMENTS PROHIBITED.

*Soups.* Turtle, mock-turtle, ox-tail, gible, mulligatawny, and all rich and seasoned soups.

*Meats.* Pork, (except in the instances named as allowable), bacon, calf's head, veal, turkey, duck, goose, sausages, kidney, liver, tripe, and every kind of fat meat.

*Fish.* Crab, lobster, and shellfish in general; and almost all other fish not specified amongst the *aliments allowed*, as likewise all kinds of salted, smoked, potted, or pickled fish.

*Vegetables.* Cucumber, celery, onions, radishes, parsley, horse-radish, leeks, thyme, garlic, asparagus; and every description of pickles, salads, and raw vegetables, or vegetables greened with copper.

Rich or high-seasoned *made dishes*.

*Pastry* of all kinds, whether boiled, baked, or fried.

*Spices, aromatics, and artificial sauces* of all kinds; as also the ordinary condiments, mustard and vinegar must be used in moderation.

*Cheese.*

Chestnuts, filberts, walnuts, almonds, raisins, and indeed the entire complement of a dessert, except what has been mentioned amongst the *aliments allowed*, under *Fruit*.

The above regulations are subject to considerable modifications in particular cases, both as regards the aliments allowed and those which are prohibited. When it is necessary to make a very material alteration in the diet and habits of a patient, it ought, in general to be done gradually and cautiously. Regularity in the hours of meals should be observed; and too long fasting, as well as too great a quantity of food at one time should be avoided.

## ACCLIMATION OR ACCLIMATIZATION.

The process by which an individual or a species, on being removed to a different climate, becomes modified in constitution and adapted to the changed conditions. The two words, however, are not strictly synonymous. Acclimation is generally used in speaking of particular individuals, and more especially of those belonging to the human species, and refers to the alterations which the system undergoes spontaneously in a foreign climate, by which it at last becomes no longer subject to the maladies peculiar to new comers. Acclimatization, on the contrary, expresses the artificial care by which man succeeds in naturalizing, under his own supervision, a species of animals or vegetables of exotic origin. Acclimation. Man inhabits all the zones and nearly every region of the earth, and has been enabled in repeated migrations to change the place of his habitations and to occupy new countries. The human species is therefore regarded as cosmopolitan; and yet two facts are important to notice in this respect: First, most of the great migrations, historic or traditional, have been made in the direction of longitude, and not in that of latitude; the migrating tribes instinctively or intentionally keeping nearly within the same parallels of latitude, and consequently not suffering very great alterations of temperature, nor meeting in their new homes with a flora and fauna very



dissimilar to those of their native country. Secondly, at the present day, although an individual may migrate either westward or eastward, as a general rule, without suffering from the change, a removal into a different latitude is almost always accompanied with peculiar dangers during the first few years of his residence in the new locality. The most marked instance of this kind is, when a person from the temperate zone visits for the first time to a tropical or subtropical region. The dangers that first beset him are fevers, which are so marked in type and so ready to attack newly arrived immigrants, that they are sometimes called the "strangers" fever. The yellow fever of West Indies and the southern United States, and the coast fever of western Africa, are well known examples of these affections. They are not absolutely restricted to new comers, the natives being also subjected to them, but the recent immigrant is so much more likely to be affected, and is attacked by the disease in so much larger proportion, it is evident that his system has in it something which offers a peculiar attraction for the febrile poison, and which does not exist, at least to the same extent, in that of the native or the old resident. After passing through a period of general ill health and debility, extending over some years, and perhaps one or more severe attacks of illness, the immigrant approximates in his appearance and habit of body to the older denizens of the place, and is no longer peculiarly liable to disorders which affected him on his arrival. He is then said to be acclimated. No doubt, part of the immunity enjoyed by old settlers in a tropical or sub-tropical climate is due to the fact that they have learned prudence in regard to exposure, and have come to regulate habitually the mode of life to correspond with the climate of the country. Recent immigrants often neglect these essential precautions, because they have not found them necessary in a temperate climate; and it is only after repeated experience of their value that they come to adopt them habitually and as a constant protection.

#### APPARENT DEATH.

APPARENT DEATH, *Asphyxia*.—In every instance where an individual has, to all appearance, suddenly expired from external causes, animation may only be suspended. There are many cases, of course, where sudden death is no mere suspension of animation; but there are others where apparent death is far from uncommon; in all cases, therefore, where there is the least uncertainty, care should be taken to do nothing that may cause death, and interment should be avoided until *certain* signs of putrefaction set in.

APPARENT DEATH FROM HUNGER.—Give small injections of warm milk, repeatedly; great care should be taken to give the food when the patient begins to rally, in the smallest possible quantity at a time. Milk may be given, drop by drop, and gradually be increased to a teaspoonful, and after some interval, a small quantity of beef tea, and a few drops of wine. After a sound sleep has succeeded, but not till then, a small meal may be given; but it is best that the patient should eat little at a time.

APPARENT DEATH FROM A FALL.—Place the patient cautiously on a bed, with his head high, in a place where he can remain quiet. Put a little Arnica on his tongue, and wait till a medical man visits him to see



if there is any fracture, or whether there are still signs of life; bleeding may be here some times of benefit, but it requires great caution. Arnica may be repeated, and also administered in injections. If the patient has been bled, give China or Quinine; but it is obvious that if much blood has been lost by the fall or wound, venesection would be injurious.

APPARENT DEATH FROM SUFFOCATION, (hanging, pressure, choking).—Remove all tight clothing. Put the patient in a proper position, the head and neck rather high, the neck quite easy, not bent forward. Begin by rubbing gently, but constantly, with cloths; give an injection of a dozen or two globules, or a few drops of Opium, dissolved in a half pint of water, and injected slowly. This may be repeated every quarter of an hour, whilst the ribs are being rubbed gently. Hold, from time to time, a mirror before the mouth, to see if the breath dims it; open the eyelids and see if the eyes contract; put warm cloths on; hot stones, wrapped in blankets, to the feet, between the thighs, to the sides, neck, and shoulders. If, in an hour, no change is produced, take a bitter almond, pound it fine, mix it in a pint of water, put a few spoonful into the mouth, or into the nose, and give the rest in injections.

APPARENT DEATH FROM LIGHTNING.—The body should be immediately removed into a current of fresh air; and cold water dashed frequently on the neck, face, and breast. If the body be cold, warmth, by friction, must be employed in the same manner as recommended for the drowned, in the next article; as well as the means therein prescribed for inflating the lungs. A few globules of Nux Vomica may be put upon the tongue, and repeated in half an hour, when, if no effect is produced, a little Nux Vomica, in water, rubbed on the neck, and some injected, may be of service. Or, better still, place the patient in a half-sitting, half-recumbent posture, in a cavity freshly dug in the earth, cover him over with newly excavated earth (leaving the face, alone, exposed, which should be turned towards the sun, until the first signs of returning animation become apparent), after which, Nux V. is to be had recourse to, as above directed.

APPARENT DEATH FROM DROWNING.—Place the body in a horizontal position, *face down*, with one wrist under the forehead. Now, with one hand upon the back, and the other upon the abdomen, press gently for about two seconds, then turn the body well upon its side, and after a couple of seconds, place it again upon the face, and repeat the pressing as before; in this way strive to induce artificial respiration by the alternate pressure upon the abdomen, and rotation of the body.

Again, should our efforts still fail, we may, in order to restore the natural heat of the body, move a heated, covered, warming pan over the back and spine, place bottles or bladders, filled with hot water, or hot bricks, to the pit of the stomach, the armpits, between the thighs, and to the soles of the feet;—put the body in a warm bath, in the sun, or at a proper distance from the fire; use friction with hot flannels, flour of mustard or other stimulants; rub the body briskly with the hand, and at the same time do not suspend the employment of other means.

To restore breathing, introduce the pipe of a common bellows into one nostril, carefully closing the other, and also the mouth, at the same

time drawing downwards and quietly pushing backwards the upper part of the wind-pipe, to allow a more free admission of air; blow the bellows gently, in order to inflate the lungs till the chest be a little raised, the mouth and nostrils should then be set free, and a moderate pressure made with the hand upon the chest; continue this process until signs of life appear.

Electricity, or a stream of galvanism passed through the chest, is of great service.

Apply pungent salts, as Sal Volatile, or Spirits of Hartshorn, to the nostrils. These means should be persisted in for several hours, and till there are evident signs of death.

When the patient shows signs of life, and can swallow, small quantities of warm wine, or spirits and water, may be taken; but till then, nothing should even be poured down the throat, either by a flexible tube, or otherwise. At this period, the patient should never be left alone, as some have been lost from want of care, who, otherwise, might have been saved.

\* APPARENT DEATH FROM BEING FROZEN.—When a patient is found in a state of frostbitten asphyxia, arising from exposure to intense cold, he should be moved with great gentleness and caution, to guard against any injury, as fracture, etc., to a place of shelter, such as a barn, or unheated apartment, since only a moderate degree of heat might annihilate all hope of restoring animation; at the same time, the patient ought to be protected from the slightest draught.

He should then, especially if the limbs have become stiffened by the frost, be covered over with snow to the height of several inches—the mouth and nostrils, alone, being left free.

The patient ought to be put into such a position that the melted snow may run off readily and its place be supplied by fresh. When there is no snow, a cold bath, the temperature of which has been reduced by ice (or a bath of cold sea or salted water), may be substituted, and the body immersed therein for a few minutes.

The process of thawing is, by these means, to be effected, and when every part has lost its rigidity, the patient should be undressed by degrees, or the clothes cut from the body, if requisite. As the muscular, or soft parts, become pliable, they may be rubbed with snow until they become red; or the body should be wiped perfectly dry; if snow is not to be had, placed in flannel, in a moderately warm room, and rubbed with warm hands of several parties, simultaneously.

In the event of no signs of returning animation declaring themselves soon after the foregoing treatment, small injections containing *Camphor* may be administered every quarter of an hour. As soon as any symptoms of approaching restoration become preceptible, small injections of lukewarm black coffee (coffee without milk) may be thrown up: the bowels, and as soon as the patient is able to swallow, a little coffee may be given, in the quantity of a teaspoonful at a time.

The measures above detailed ought to be persevered in for several hours against the excessive pain which is generally experienced when life is restored; *Carbo veg*, should be prescribed in repeated doses, and if it

fails to relieve the suffering, *Arsenicum* may be given. The party rescued must avoid subjecting himself to the heat of fire or stove for a considerable length of time after his recovery, as serious consecutive ailment, and particularly disease of the bones, is likely to follow.

APPARENT DEATH FROM NOXIOUS VAPORS.—The treatment consists in removing the body into a cool, fresh current of air; dashing, frequently, cold water on the neck, face and breast; if the body be cold, applying warmth, etc., as above recommended to the drowned; inflation of the lungs, early and judicious application of galvanism or electricity;—after life has been restored, Op., or Acon., may be given with advantage.

#### VERIFICATION OF DEATH.

The prize of five thousand francs given to the Academy of Medicine, France, to be awarded to the discoverer of a simple and easy process by which any illiterate person might be able to ascertain, without a doubt, whether death had really and irrevocably taken place, was divided among four competitors.

1. If a portion of the body be rubbed with a coarse wet towel, or with the back of a knife, and then be left exposed to the air, in the course of a few hours the skin will have become transparent and like parchment, if death has really occurred.

2. If a light be held to the back of a finger at a moderate distance a blister will be formed; if this contain serosity, there is still life in the body. If the skin be touched with a piece of burning charcoal, if death is complete, it will become livid, a blister will be raised filled with vapor and having no serosity nor appearance of reaction. Petrification is also satisfactory evidence of death, but this can not be waited for.

## Part Second.

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### DISEASES OF THE BRAIN, THE SPINAL CORD, AND THE NERVOUS SYSTEM, GENERALLY.

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## CHAPTER VI.

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### MENINGITIS CEREBRO-SPINALIS.

#### SPOTTED FEVER—CEREBRO-SPINAL MENINGITIS.

This disease has appeared in various parts of the United States and Europe as an epidemic. It is of a most serious and often malignant character. The symptoms are not constant, but vary in each epidemic; indeed the variation is so great, that of the reports of some thirty physicians which we have consulted, we find no two alike. Our own experience in this disease, is confined to three cases of undoubted Spotted Fever, two of which recovered, the third coming into our hands after the disease had continued five days, and the patient was then dying. We will, therefore, in view of our own inexperience, transcribe the symptoms, as given by Professor Felix Niemeyer of Berlin, in his exhaustive report of the epidemic in the Grand Duchy of Baden, 1865, and after that, the symptoms as given by Dr. Bushrod W. James, of Philadelphia, as he observed them with his very extensive opportunities, in the United States.

**SYMPTOMS** by Niemeyer: "Without any other precursory symptoms, the patient is at once attacked with a chill, attended with violent headache and vomiting. The headache speedily increases in intensity, the patient becomes exceedingly restless, tosses about, the pupils remain contracted, the sensual consciousness remains unembarrassed. The pulse rises to 80 or 100 beats per minute. At the end of the first, or on the second day, much less frequently at a later period, we notice that the head is somewhat drawn backwards; the patient continues to complain of violent headache, and the pain spreads from the head to the back of the neck and to the back. The restlessness becomes excessive, the thoughts of the patient become confused, the pupils remain contracted, the abdomen caves in, the bowels are constipated. The frequency of the pulsations and respirations now increase to about one hundred and twenty of the former, and upwards of seventy of the latter, per minute; the bodily temperature continues moderately low. In the course of the third and fourth day, the tetanic spasms of the posterior cervical and dorsal muscles become more and more prominent, and patients are sometimes attended with lock-jaw. Opisthotonus (bending backward) supervenes with an extraordinary degree of intensity; the consciousness is gone, but the patient still continues

to toss about in bed, the pupils still continue contracted, the bowels constipated, the abdomen sunken; the urine is discharged involuntarily, or else the bladder remains distended and the urine has to be drawn off with a catheter. The patient now lapses into a profound stupor, (unnatural sleep), the moaning breathing is accompanied by a rattle, and death takes place with the phenomena of an acute œdema (collection of a liquid serum in the lungs so as to fill them up) of the lungs."

I dislike Niemeyer's use of the word œdema here. "This picture of the disease is sometimes modified by the occurrence of a short preliminary stage, which is marked by slight pains in the head and back, or by the breaking out of herpetic vesicles (eruption of blisters), or of scattered, dark colored, roseola (red) spots on the first, second, or third day of the disease, or else the above described symptoms develop themselves in a much shorter period, which circumstance constitutes one of the most important modifications of the disease; so that the consciousness vanishes, even on the first day of the attack, and a violent tetanic spasm (spasm with unyielding stiffness) of the back of the neck and back begins; or finally, may set in with such violence, that a fatal termination of the disease is reached even on the first or second day. This cursory picture of cerebro-spinal meningitis, and of the general course of the disease, applies indeed to most, but not by any means, to all cases of the epidemic. This picture does not comprehend phenomena that occur in a variety of cases, such as: deafness in one or both ears, diplopia (double vision), from a diseased condition of the optic nerves, ptosis (palsy of the upper eyelid, softening and destruction of the cornea (front coating of the eye), and finally, paralysis of the facial nerves and of the extremities, either on both or only one side of the body."

Symptoms as quoted by B. W. James, M. D., from experience and a careful study of the disease, as it has appeared in the American epidemics. In many of the epidemics, prostration appears to have been a very prominent symptom:

"It sometimes sets in with such a sudden violence, that persons who were afflicted with heart disease, dropped down dead in the street in consequence of the sudden shock. This happened in a number of cases. Many persons died twenty-four or forty-eight hours after being seized with the chill. Persons overtasked with labor would very often die in fourteen or sixteen hours from the chill. The general features of the disease were: vertigo with headache; diarrhœa, sometimes of a very prostrating character, in other cases diarrhœa alternating with constipation; moderate fever, flashes of heat mingled with creeping chills, piercing pain through the head, soreness and stiffness of the upper portion of the spine, with aching pains in the spine, or tingling soreness and tenderness of the skin, severe muscular pains, numbness of the limbs with partial paralysis; spasmodic twitchings of the muscular system, sometimes amounting to tetanic convulsions with lock-jaw; the consciousness not much affected, except when the disease is at its height, when a more or less active delirium, and finally coma and death set in. In most cases the eye looked injected and red, and the hearing was impaired, the pulse had a moderate frequency, generally about one hundred per minute, the tongue remained moist, and in the



course of the disease. became covered with a dark, brownish fur; the breathing was somewhat accelerated and interrupted by moaning inspirations; during the tetanic spasms the expirations had a hissing sound, the air seeming to be forced out with an effort, the skin has a peculiar bluish pallor in this disease, owing to the general turgescence of the venous system; the spots which have given to this disease its name, SPOTTED FEVER, broke out on different parts of the body, generally however on the chest, abdomen, and thighs; sometimes the skin had a mottled appearance, or the spots looked like measles-spots, or had a rose colored tint. One hour the patient will seem quite well, and the next the most alarming symptoms may be present."

TREATMENT. Give, as soon as the nature of the attack is known, a good, full sweat; the hemlock sweats of easy application where hemlock branches are obtainable, are always efficacious. Two teaspoonsful of *best* alcohol to four of water, one teaspoonful of this solution every half hour, until there is a decided abatement of the symptoms. In cases threatening immediate dissolution, the dose may be doubled for a short time.

#### ALLOPATHIC TREATMENT.

This disease is an essential fever, attended with inflammation of the membranes of the brain and spinal cord; hence its name. It is popularly called *spotted fever*. The disease is very fatal, in some epidemics, reaching as high as four fifths of all the cases, in other epidemics, not over one fourth of the cases die.

The bowels should at once be unloaded, but beyond that, purgation should not be practiced. Ice in bladders may be applied to the head and spine, if agreeable to the patient, otherwise they should not be used. The cold or warm wet *pack*, according to the degree of fever, should be used once a day. If the temperature is 104° or over, the pack should be cold. If not so high as this, cool sponging of the skin will suffice. When the pack is used, the patient is to be wrapped in a sheet wrung out of water, and then enveloped in blankets. In about an hour free sweating occurs. The pack is then removed, the patient wiped dry and placed in bed.

Opium should always be given to the extent of relieving pain. This is the most useful known remedy in this disease. The physician will obtain the best results by the hypodermic use of *morphia*. When effusion has taken place, and there is stupor and insensibility, the usefulness of opium is at an end. Ergot is the remedy calculated to diminish the congestion of the cord, and should be given in large dose; a teaspoonful of the fluid extract every six hours is a good rule. In the beginning of the disease, quinine is useful in controlling the fever and inflammation. If, however, a single large dose—twenty grains—is not followed by benefit, it should not be repeated, unless malarial disease consists. In the cases having high fever the Fluid Extract of Gelsemium given in five drop doses, two or three hours apart, will be found useful in moderating the action of the heart and producing a general calm.

Ice, acid drinks, cold tea, and lemonade should be freely allowed to relieve thirst, milk, eggs, nourishing broths should be given in sufficient variety and quantity to maintain, as far as possible, the strength of the patient.

In case food is not taken, from vomiting or other cause, nourishment should be given by injection into the rectum; half a pint of strong beef tea with two or three tablepoonsful of rich cream, or a half teacup each of beef essence and milk, can be given two or three times in the twenty-four hours. The injected nourishment should be caused to be retained by pressure upon the anus with a napkin or towel. Stimulants should be avoided until the symptoms denote that the vital forces are beginning to fail, and just in proportion to this failure are they demanded. Their beneficial effect is shown by a fuller, stronger, and more regular pulse and reduced febrile and nervous excitement. A tablesoonful of whisky or brandy, from one to three hours apart, is a good rule varied according to the judgment of your physician.

In SPINAL MENINGITIS (inflammation of the membrane of the spinal cord), the principles of treatment are the same as is given for acute Meningitis-Cerebral. The disease generally proves fatal within a week.

#### HOMŒOPATHIC TREATMENT.

*Gelsemium*, *Belladonna*, *Veratrum Viride*, *Hyoscyamus*, during congestive stage, when the congestive and inflammatory symptoms predominate. *Gelsemium* and *Veratrum Viride*, both of which may, without hesitation, be alternated with *Bell.*, or *Hyos.*, if the inflammatory and typhoid symptoms seem to co-exist.

*Bell.*, and *Hyosc.*, may be relied on, if a more or less active delirium has set in, the patient is inclined to sleep, the conjunctiva (covering of the eye) is found congested, the pupils are alternately contracted or dilated, or one pupil contracted and the other dilated, and spasms drawing the head and body backward. *Bryonia* or *Rhus-toxicodendron* should be resorted to, when the high inflammatory condition seems to give way to one of a typhoid character, and more particularly when the following symptoms are present: Lock-jaw, partial loss of consciousness, stupor with an expression of deep suffering in the countenance, difficulty of protruding the tongue, the corners of the mouth are drawn down, the muscular pains are very severe. A great degree of restlessness and uneasiness is more especially indicative for the use of *Rhus-tox.* For more indications study the Repertory.



#### HYPERÆMIA OF THE BRAIN.

##### EXCESS OF BLOOD IN THE BRAIN—CONGESTION OF THE BRAIN.

By Hyperæmia of the brain is generally understood an excess of blood in the arteries and veins (blood vessels) of the brain; or, in other words, more blood in the brain than is natural in a condition of perfect health. This unhealthy increase of the volume of blood may be occasioned by *three distinct causes*. In the first place, the flow of the blood from the brain, being natural, a larger quantity of blood returns to the brain. In the next place, the flow of blood from the brain may be diminished by some disease of the blood vessels, or their surroundings, while the amount carried to the brain by other vessels, not so diseased, may be natural in

amount. Finally, the cause may be located in the brain itself, the *brain substance* (cerebral parenchyma) may become hardened or wasted away (*atrophied*) or softened; or the capillaries (very small ends of the vessels) may become enlarged.

This diseased condition of the brain is confined either to a limited locality, or extends throughout the whole brain. It is scarcely ever possible to establish, during the life of the patient, a sure diagnosis regarding the exact seat and the extent of the hyperemia, for the reason that congestions of very limited extent frequently excite much more striking symptoms than more extensive congestions. So far as treatment is concerned, such a diagnosis is scarcely ever of much importance.

The most important terminations of this engorged condition of the brain, which impart to it a higher significance in practice, are: sudden death from paralysis of the brain, in consequence of excessive pressure of the blood; dilation (widening) of the vessels, especially the capillaries, by which the tendency to congestion is increased, exudation and extravasation (or throwing out and collection of blood in some of the cavities, or collection beneath some of the covering membranes).

The causes of cerebral hyperæmia are various and important, in a practical point of view, since, in most cases, they determine the choice in the selection of the proper remedy. These causes are of two kinds:

CAUSIS.—1st, Those which affect the brain directly, and 2d, Indirect causes, by which, through the operation of influences that are partially unknown to us, the brain becomes involved in an affection more or less remote from the brain. Among the direct causes affecting the brain, the most prominent are: Concussions of the head by a fall, blow, or like accident; continued, persevering and excessive mental exertions; emotional excitement, such as joy, grief, anger, disappointment, chagrin, etc.; exposure to excessive heat of the sun (*sun stroke*), or to artificial heat; likewise to excessive cold; more particularly, if the influence of cold is *suddenly* followed by the action of intense heat.

In the second class of causes, we may range, according to circumstances, almost all kinds of febrile (fever) affections, since almost all of them may be associated with this condition of the brain; in this place we will content ourselves with mentioning diseases where almost always congestions of the brain are present; they are: Erysipelas of the face; Diphtheria; Mumps; Inflammatory diseases of the eyes and ears; difficulties during teething. Among the more or less chronic affections that may be mentioned in this connection, as casual circumstances, the most prominent in the list of those that impede the flow of blood from the brain, are: Defects of the heart, right side and tumors (morbid growths) on the neck. In the list of those that occasion a general increase in the impulse of the circulation, are: Diseases of the heart (left side), suppression of habitual losses of blood (such as the menses or piles). In this last list, we likewise include those cases caused by the abuse of alcohol, in all its varied forms, or of other narcotic substances—such as opium.

Without doubt there also exists a tendency to congestions of the brain; in which case, they may be excited by any perceptible change from a condition of health. This tendency is identical with the so called

*apoplectic habit*, but cannot be recognized, with any certainty, before its occurrence, by definite diagnostic signs, but has to be determined in most cases by the occurrence of the actual fact; it is a certain fact, that it is not alone indicated, as is popularly believed, by a thick-set frame and a short, thick neck. On the other hand, the idea of a probable occurrence of hyperæmia of the brain suggests itself before it happens, in the case of individuals, who, while consuming quantities of nourishing food, do not take bodily exercise in a corresponding ratio, and in whom this mode of living develops a condition that may justly be termed plethora, or excessive flesh. We have already stated, that the frequent repetition of attacks of this nature leads to a dilation (widening) of the blood vessels, which increases the disposition to renewed attacks.

Generally speaking, you can safely predict a favorable termination in this disease, since a fatal result need not be apprehended, unless some other complicating disease should supervene. In one respect, it depends upon the age of the patient. Whereas, in persons of middle age, the danger is not very serious; it is, on the contrary, much greater in the case of children and old people. In the case of children, death takes place very frequently in consequence of the paralysis of the brain, occasioned by the excess of blood in that organ; in old people the vessels are generally so fragile that they easily tear, and their contents are discharged upon the brain. The apparent violence of the disease is no adequate guide by which to judge of the danger likely to result from it, but the more frequently the trouble occurs, the more dangerous it becomes. When it depends upon pre-existing derangements, the prognosis depends almost exclusively upon the character of these derangements.

THE SYMPTOMS by which hyperæmia manifests itself, vary according as one or another locality of the brain is the seat of the affection, and according as the pressure upon the brain is more or less violent. The head feels heavy, confused, or as if encircled by a tight band; the headache, which is scarcely ever wanting, is almost always throbbing, and is made worse by stooping, unusual exercise, and every mental effort; buzzing in the ears, sensitiveness of the eyes, even seeing sparks and obstruction or obscuration of sight, are generally present.

Vertigo (giddiness, dizziness) is seldom wanting. If arising from hyperæmia, a characteristic sign is to become aggravated by stooping, but more especially by looking up. Generally the patient feels drowsy without being able to sleep, or else the sleep is anxious, disturbed, full of dreams. Feels very languid and his gait is rendered insecure by want of firmness in the lower limbs. The pulse may continue natural, and there may be no fever present. This mildest form may be combined with constant restlessness and gloomy ideas; sleep is disturbed by anxious dreams, which, in the more violent cases, do not altogether disappear while the patient is awake; they even assume the character of hallucinations, and, if the trouble continues without being checked, a permanent mental derangement will not unfrequently result. Palpitation of the heart, ill humor, distrust, total indisposition to work, and fitful mood are almost always present. This form of hyperæmia mostly befalls individuals, who, while enjoying good cheer, take but little *bodily* exercise, but perform a large amount of mental labor.



The foregoing symptoms are almost characteristic, also, of hyperæmia, consequent upon suppression of certain forms of loss of blood.

The trouble is much more dangerous, if it sets in as an acute disease, and, although violent at first, continues to increase in intensity, until it terminates in death. In such cases, the face looks dark-red, the eyes are streaked with red, the blood vessels of the head and neck pulsate violently, the pupils of the eyes look smaller, all the senses are very sensitive, the headache is maddening, sometimes driving the patient to suicide. Delirium is apt to follow. This type of the disease is most common after *sunstroke*, and not unfrequently is an accompaniment of mental derangement, of which indeed it may frequently be said to be the cause. Not unfrequently the above described symptoms are suddenly followed by all the signs of apoplexy, regarding which the diagnosis cannot be established with any certainty, until the rapid course and sudden disappearance of the symptoms of paralysis have satisfied one that no pouring out of blood (extravasation) can have taken place, since the fluid could not have been reabsorbed so soon. In this category belong, most likely, all the cases that are said to have been cured so rapidly. This disease never exists during an epileptic attack, in which the course of the attack alone gives perfect certainty concerning its true nature.

Among children hyperæmia is an almost habitual accompaniment of all fevers, and not unfrequently conceal, the symptoms of true disease, for the reason that the course of the hyperæmia is marked by the more violent symptoms. In every considerable congestion of the brain convulsions of some kind almost always occur; they are accompanied by drowsiness even to the extent of sopor (sound but unnatural sleep), delirium, excessive restlessness, and anxiety and vomiting, in nearly all cases. However threatening such a condition may seem at first sight, in most cases it passes off speedily and without leaving a trace behind, so that the congestion seldom lasts longer than thirty-six hours, and generally abates after the lapse of twelve hours.

**TREATMENT.** In the acute form of the disease, applications of cold or ice water, to the head and keeping the extremities warm, is excellent. In the chronic form resort to frequent bathing and rubbing, and plenty of healthy outdoor exercise.

#### ALLOPATHIC TREATMENT.

**ACTIVE CONGESTION OF THE BRAIN**, not sufficient to produce apoplexy or sudden coma (insensibility), is denoted by the following symptoms: Pain in the head, sometimes intense, not limited to any special part, with a sense of fullness, bursting, or weight and throbbing. The head is hot, and the carotid, and other arteries of the neck and head, pulsating violently. The face is flushed, the eyes injected, there is intolerance of light. The mind is confused, and consciousness may be suspended; there is dizziness, ringing in the ears, and difficulty in speech. If paralysis and insensibility exists, the trouble is greater than simple congestion, there is apoplexy from extravasation of blood.

These symptoms (signs) are, also, those of the beginning of inflammation of the membranes of the brain, and a discrimination cannot, at



once, be made. The treatment is the same. The intensity of the congestion determines the prominence of the symptoms.

Intense congestion calls for blood-letting, promptly, at the hands of a surgeon, as necessary in preventing apoplexy and sudden death, hemorrhage upon the brain, watery effusion, or inflammation. Blood-letting gives relief by weakening the action of the heart, and diminishing the quantity of the blood sent to the head. If the congestion is not sufficient to call for bleeding, either general or by wet cups applied to the back of the neck, relief may be obtained by ice to the head, hot foot-baths, made stimulating by the addition of mustard or red pepper, and an active purgative; *one or two table-spoonful of Epsom Salts, dissolved in water*, is as good a physic as any for the purpose, in domestic practice. The after-treatment will have reference to the removal of the causes, if possible; they are, aside from enlargement of the heart and sunstroke, principally some form of using alcoholic stimulants and over-stimulating food, excessive mental or emotional activity and anger. If the patient is strong or robust, the diet should be less hearty, and a cathartic of a smaller dose of salts, or a Siedlitz powder, taken occasionally. Let all the habits of life be governed by the word *moderation*.

PASSIVE CONGESTION OF THE BRAIN is caused by some obstruction to the return of the blood from the head through the veins, except it may be caused by weakened arterial circulation. The trouble is distinguished by drowsiness, dullness of mind and perceptions, and sometimes by convulsions, in children. Active delirium, throbbing arteries and increased heat, are wanting. Passive congestion may lead to watery effusion or extravasation of blood upon the brain. When caused by disease of the heart, or by tumors pressing upon the veins, and so producing the congestion, treatment has reference to a removal of the obstruction. For treatment of disease of the heart, see Chapter XXIII.

For the treatment, or removal of tumors, the skill of a surgeon is necessary. To overcome enfeebled circulation, everything which produces exhaustion is to be avoided and its force increased, and the blood enriched by nutritious food and tonics. The Citrate of Iron and Quinine, one dram, dissolved in four ounces of simple syrup: Dose, a teaspoonful; or the Soluble Citrate of Iron, dissolved in Sherry Wine, one dram to eight ounces: Dose, a teaspoonful, are good tonics taken before each meal.

#### HOMCEOPATHIC TREATMENT.

BELLADONNA. In plethoric persons disposed to rush of blood to the head, red, almost purple face, dilated pupils, nervous agitation, sensitiveness to all unusual sounds and motions, especially any sudden jar, as of the bed or floor, delirium, constant or intermittent mutterings, and, if present, a disposition to perspire, will be found reliable indications for *Bell*.

ACONITE. If the trouble is the result of violent emotions, such as fright or mortified feelings. This remedy is also very useful in alternation with *Bell.*, in cases of acute hyperamia among women and children, at times where the latter remedy is indicated, but the symptoms show also a high fever and excited condition of the heart.

OPIUM is a more useful remedy in this disease than either of the others already mentioned, provided the trouble has not been produced by this remedy in some of its forms. Its use is indicated by continued sopor (sleep) with insensibility of all the senses, dark redness of the face, with paleness and coldness of the rest of the body, slow pulse, slow breathing.

TOBACCO is one of two drugs which *frequently cause* this disease. Do not take or give it in any form. If this so-called innocent habit is one of your failings, be firm, shake off the demon you see so surely destroying your life, and quit forever the habit which is costing you so dearly.

NUX VOMICA. When the disease is caused by a sedentary mode of life, or excessive mental labor, and more especially in the commencement, when caused by frequent use of spirituous liquors, attended with constipation or irritation of the kidneys, Nux is a *good* remedy.

ARNICA. When the derangement is the result of a concussion, fall, or blow on the head, etc., use Arnica.

VERATRUM VIRIDE. When *Bell.* is indicated apparently, but after being given for twenty-four hours, a dose every half hour or hour, has produced no change for the better, you will find a change to *Veratrum Viride* a good one; it has been used extensively in this affection, both in general and hospital practice, with the best results. It is best given in a low potency.

Dose for any of the preceding remedies, eight pills in three table spoonful of water, to be given a teaspoonful every two to four hours, except *Ver. Vir.*

SUNSTROKE in hyperæmia from the heat of the sun, applications of ice or *cold* water to the head and along the back, and to the extremities, is indispensable to re-awaken the paralyzed reaction of the organism, but this should not be an entirely constant application, but should have short interruptions at intervals.



## ANÆMIA OF THE BRAIN.

### LACK OF BLOOD TO THE BRAIN.

Anæmia of the brain is not, as generally considered, a separate affection, but rather a symptom of, or an affection caused by, some other disease. Anæmia of the brain either consists in a diminished volume of blood in the brain, or in a supply of blood to the brain, destitute of red globules. In the former case, it is caused by constriction or compression of the arteries through which the blood courses toward the brain, or by any other circumstances, in consequence of which the space within the skull is narrowed. In the second case, all the causes of anæmia must be considered; whereas, the deficiency of blood consequent upon sanguinous losses, will have to be counted, since it is not only the decrease in the quantity of the blood, but, also, in the quality, that determines the anæmia.

Then, again, there is no doubt but that changes of a spasmodic nature may induce a sudden decrease of the volume of blood to the brain; a greater or less degree, we have observed, in consequence of powerful mental emotion or excitement.

*The symptoms* of anæmia of the brain differ a good deal, according as it develops itself more or less rapidly. If it develops quite rapidly, we have a most perfect image of syncope (fainting or swooning), unconsciousness, voluntary muscular movement are suspended, most generally, amid slight convulsions, and both the breathing and the pulse are slower. This condition is most prominently seen, during metrorrhagia (hemorrhage from the womb) in confinement; or from some other morbid discharge of blood. Evidently such accidents are attended with great danger to life. If the anæmia sets in more slowly, symptoms of stimulation always precedes the sinking of the activity of the brain. Here, as well as in excess of blood in the brain, we have violent headache, great irritability of the organs of sense, buzzing in the ears, dimness of sight, vertigo (dizziness); and it is only from the course, and a careful study of the causes of disease, that we are able to obtain light regarding their cause.

It is characteristic of most cases of anæmia of the brain, that the symptoms either abate or disappear in the horizontal position, and that the partaking of food or stimulating substances, cause an improvement.

*The course* and duration of this disorder depends, of course, upon the aggravating causes. What is certain, is, that the appearance of anæmia of the brain is always a very bad symptom, especially in the case of children.

*Treatment.*—We must content ourselves with mentioning only a few remedies, known to be most prominent for anæmia of the brain, when manifesting itself as an independent, and more particularly in the form of an acute disease.

IPECAC, as a remedy, is particularly suitable for children, after rapid losses of animal fluids, if the symptoms of convulsions are present, together with more or less stupor.

*Dose:* Eight pills, or four drops of solution, in three table-spoonfuls of water. Give a tea-spoonful every two or three hours.

SECALE CORNUTUM is particularly useful in the hæmorrhage from the womb of parturient females; here it acts in a two-fold direction, against the hemorrhage itself, and against the symptoms arising from the brain and spinal marrow; upon both of these organs it acts in a very marked manner.

*Dose:* As for Ipec.

CUPRUM is only suitable where the whole process is developed slowly, and is more especially characterized where there is some spasmodic phenomena, such as some mental excitement.

*Dose:* A small powder, or eight pills, in water, as directed for Ipec.

*Home remedies*—Ammonia or Camphor applied to the nose, or even a little cold water applied to the face, will often arouse from syncope arising from anæmia of the brain.

## APOPLEXY.

APOPLEXY is a sudden loss of consciousness, beginning at the brain, depending upon hemorrhage upon the brain, congestion or embolism (a small clot from the heart lodged in an artery of the brain.)

CHARACTERISTICS.—Sudden or gradual loss of consciousness, sensation, and motion, with greater or less disturbance of the pulse and respiration.

Few diseases offer a greater number of varieties in form than Apoplexy; and there is scarcely a single classification of the many that eminent medical writers have given to the world, which is not more or less liable to objection.

It is also extremely difficult to distinguish clearly between the different varieties, the external symptoms not always bearing a uniform relation to the internal injury; thus all the indications of serious Apoplexy may declare themselves from sanguineous extravasation; and it is not always possible to decide, in Apoplexy, whether effusion, or simple congestion of the vessels of the brain, has taken place.

PREMONITARY SYMPTOMS.—Continued inclination to somnolence; heavy, profound sleep, with snoring respiration; nightmare, grinding of the teeth, shocks, or cramps, *extreme drowsiness*, or a general feeling of heaviness, or disinclination to the least exertion; frequent yawning and fatigue after the slightest exercise. A sense of weight and fullness, and pains in different parts of the head, sometimes very deep-seated. Head-ache and megrim, or giddiness and fainting; pulsation of the arteries of the temples and neck, with swelling of the veins of the head and forehead; disturbance of the functions of the brain, evinced by the *loss of memory*, irritability of temper, or mildness and indifference, despondency and weeping; irritation of the conjunctiva, dimness of vision, specks or motes before the eyes, or flashes of fire or sparks during darkness; acuteness of vision, or double vision, sometimes, also, the words in a line appear to run into one another; difficulty of opening or closing the eyes; noises, humming, singing, etc., in the ears; dullness of hearing; dryness of the nostrils, pinched appearance of the nose, with false perception of an unpleasant odor; sneezing, and slight bleeding of the nose; stammering, and indistinct pronunciation; difficulty of swallowing; *numbness* or *torpor*, or pricking sensation in the extremities, with *inarticulate speech*, and occasional partial attacks of paralysis in the face (distorting the features), or in some of the muscles of the limbs; pains in the joints; weak or unsteady mode of progression, difficulty of passing water, etc.,

CONFIRMED ATTACK. SYMPTOMS.—The attack itself is commonly ushered in by either of the following group of symptoms:

The patient suddenly *falls to the ground*, and is instantaneously deprived of sense and motion. The limbs are relaxed and perfectly motionless, or the whole of one side is rigidly contracted, whilst the other is relaxed and powerless; in some instances one limb (such as an arm) is alone implicated. The speech is either entirely suppressed, or a few inarticulate sounds are all that can be uttered; the countenance is flushed, or livid and puffed, and there is *foaming* at the mouth, with contortion



towards the affected side. The respiration is slow, impeded, and usually accompanied by a rough, harsh snoring. The pulse varies, but is usually weak at the commencement, and fuller and stronger, but slower, as reaction supervenes. In other cases, again, the patient is suddenly seized with partial *paralysis*, comprising either an arm or leg, or the whole of one side of the body, attended with loss of the power of utterance, and pale, sallow, or livid and bloated countenance. In the course of a few hours, all or the greater part of the symptoms mentioned under the first variety of apoplexy, are prone to supervene.

ISSUE AND RESULTS.—When in either form of the disease, recovery is about to take place, consciousness gradually dawns upon the patient; he begins to recognize persons and objects around him, answers when spoken to, or makes signs for writing materials, in order to express his wants on paper, when the power of speech is still denied him.

But when a fatal termination is to be apprehended, the breathing becomes more and more oppressed, the face becomes pallid, and a cold, clammy sweat bedews the brow; the act of swallowing is rendered difficult or impracticable, the teeth become clenched, the eyes dim and glazed, and the evacuations are passed involuntarily.

PREDISPOSING CAUSES.—Chronic derangement of the primary organs of digestion, and, in some cases, disease of the heart, are the principal predisposing causes of Apoplexy. The conformation of the frame is also considered to predispose persons to attacks of Apoplexy. Old age is more subject to this disease than the robust or mature periods of life. Particular seasons, such as the equinoxes (the transition from winter to summer, and from autumn to winter), increase the predisposition to attacks of Apoplexy. Sudden changes of the barometric conditions of atmosphere are also known to operate as predisponents.

EXCITING CAUSES.—The exciting causes of Apoplexy are intemperance in eating and drinking; mental emotions; obstructed circulation, arising from tight articles of dress around the neck or waist, or from prolonged stooping, or keeping the head in a dependent position; intense study; blows on the head; the use of opiates; baths at too high a temperature; violent vomiting, or strong muscular efforts; the suppression of habitual discharges; exposures to the rays of the sun; extremes of temperature; accidental loss of blood, or excessive venesection.

### ALLOPATHIC TREATMENT.

TREATMENT OF APOPLEXY will have reference to the period of attack, and to its prevention. If an attack has occurred, the patient is to be placed in a cool, well aired room, with the head raised and cold applications applied. If the head is hot, and the arteries throbbing, and the face flushed, ice should be applied to the head, and hot foot-baths with mustard, or mustard plasters, to the feet and legs. The dress about the chest and neck loosened.

If the stomach is full, a vomit (emetic) should be given; but not otherwise. A tablespoonful of mustard, in water, is as good as any. An emetic which produces straining should not be given.



There is, generally, an advantage in an active cathartic. For this purpose *three drops of Croton Oil* is the best cathartic, on account of the briskness and quickness of its action. It can be given in a little syrup or glycerine. If free purgation does not occur in four hours, the dose should be repeated. The action of the physic can be hastened by *injections of soap suds having a little salt added*; one pint is the usual size for an injection. If the pulse is small or feeble, or the patient weak, a cathartic should not be given; but if it is known that the bowels have been constipated, they should be moved by an injection.

If the patient is below middle life, the condition is probably active congestion, particularly if the symptoms characteristic of this condition obtain, such as flushed face, congested eyes, throbbing carotids and other arteries of the head and neck, and a hard, resisting pulse, the life of the patient may depend on the immediate abstraction of blood.

When paralysis exists, the apoplexy depends upon extravasation of blood from the rupture of an artery within the skull, or upon embolism (plugging of an artery in the brain by a small clot from the heart), bleeding should not be resorted to. In the latter case, it can do no good, and in the former may do positive harm, by so weakening the patient that he cannot survive long enough for the clot of blood to absorb.

If the patient regains consciousness, and paralysis of one side of the body (hemiplegia) remains, there is a clot. Cooling washes should be applied to the head, the bowels kept open, and the food nutritious, but unstimulating. Recovery will depend upon the absorption of the clot by the efforts of nature. The PARALYSIS will be treated of, under that disease.

PREVENTIVE TREATMENT.—As there is liability of apoplexy recurring, after recovery from an attack, all possible precautions should be observed. The individual should avoid violent bodily exertion, or strong mental labor, venereal excitement, the use of alcohol in any form, the stooping posture, and tight neck cloths. The head should be well elevated at sleep, and every morning the head bathed in cold water. When dizziness, headache, with throbbing of the arteries, occur, a brisk cathartic should be taken. The rule of life, as stated in the treatment of acute congestion, is *moderation*.

Head symptoms are sufficiently common without being followed by apoplexy, so that those who experience them need not become unhappy from fear of apoplexy, especially if they have never had the disease.

### HOMŒOPATHIC TREATMENT.

Homœopathy possesses many remedies, by means of which it is frequently possible to ward off an impending attack of Apoplexy.

In order the better to facilitate the selection of the appropriate medicines, inasmuch as the immediately exciting cause frequently serves to modify the course to be adopted, the subjoined table of medicines, especially appropriate for the treatment of cases distinctly traced to particular causes, has been pre-attached to the distinctive indications afforded for each medicine, separately, further on this article.

But it is, at the same time, necessary to caution the reader against holding the cause as paramount to the particular indications present, *for the cause is ever the subordinate reason for selection. But when any one of the remedies named as appropriate for the treatment of cases traceable to PARTICULAR CAUSES, is also found upon reference to PARTICULAR and DISTINCTIVE INDICATIONS, to correspond with the requirements of the case, we have thus ascertained a double reason for being assured that the selection is correct.*

INDICATIONS AFFORDED BY PARTICULAR CAUSES,  
DURING THE PRESENCE OF PREMONITORY SYMPTOMS.

When the attack is directly traced to a CHILL, select especially from : \* ACONITUM, *Opium*, *Nux-vomica*, and MERCURIUS.

When the attack is traceable to a SUDDEN FRIGHT, select especially either : \* *Aconitum* or *Opium*, or both alternately.

When CONCENTRATED GRIEF is ascertained to be the exciting cause, select especially from : \* *IGNATIA* and *Lachesis*.

When SEDENTARY HABITS or over-application to STUDY is distinguished as the exciting cause, select especially : \* *Nux-vomica*.

When the attack is directly traced to a FIT OF PASSION, select especially from : \* *Aconitum*, *BRYONIA*, and *Nux-vomica*.

When EXCESSIVE JOY is distinguished as the exciting cause, select especially from : \* *COFFEA* and *Opium*.

When the attack is directly traced to OVER-INDULGENCE in vinous and spirituous liquors, select especially from : \* *NUX-VOMICA*, *Opium*, *LACHESIS*, and *Pulsatilla*.

When DERANGEMENT, from overloading the STOMACH, is recognized as the exciting cause, select especially from : \* *PULSATILLA*, *IPECACUANHA*, and *Nux-vomica*.

When EXPOSURE TO THE SUN or a HOT BATH (too hot) is distinguished as the exciting cause, select especially from : \* *BELLADONNA* and *Aconite*, or both alternately.

When the attack is directly traced to SUPPRESSION of an habitual EVACUATION OF BLOOD, select especially from : \* *Nux-vomica* and *PULSATILLA*.

ACONITUM is required in all cases where there are evident symptoms of fullness of the vessels, determination of blood to the head, characterized by redness and fullness of the face, distension of the veins of the forehead, quick, full pulse, restlessness, and anxiety.

*Dose:* Of a solution of six pills to two table-spoonfuls of water, give a teaspoonful every hour, until amelioration or change ; but if, after three doses have been given, the improvement does not become speedily progressive, proceed with the next medicine.

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\* The selection from one or more of the medicines thus enumerated, must, however, as already observed, depend upon the *correspondence* between the *symptoms* of the case, and those hereinafter enumerated in respect of each of these medicines separately. But if the *indications* for two or more medicines (hereafter afforded) be so closely identical as not to be decisive between them—whereas both are *not* applicable to the treatment of cases arising from the *same cause*—then this discrepancy will be decisive between them, *if the cause be clearly ascertained.*

BELLADONNA is of essential service when the symptoms of congestion do not speedily or thoroughly yield to *Aconite*, or should only a partial degree of amelioration have taken place, in which case this remedy should be administered four hours after the last dose of the foregoing,—or, further, should the following symptoms present themselves: redness and bloatedness of the face, injection of the conjunctiva (the mucous membrane which lines the eyelids, and covers the front of the eyeball), violent beating of the arteries of the neck and temples, noises in the ears, darting pains in the head, with violent pressure at the forehead, increased by movement, the least noise or bright light; double vision, and almost all the symptoms relative to the eyes already mentioned; dryness of the nose, with unpleasant smell and bleeding of the nose; fiery redness of the throat; difficulty of swallowing; slight attacks of paralytic weakness or heaviness in the limbs.

*Dose:* Of a solution of six pills to two tablepoonsful of water, give a teaspoonful (or two pills dry on the tongue) every three hours, until improvement or change.

NUX-VOMICA is particularly suited to cases in which the apoplexy threatens individuals of sedentary habits, addicted to the use of ardent spirits, or too great an indulgence in the pleasures of the table, or in those who have long been affected with indigestion, either bilious or nervous, and have, consequently more or less of the rheumatic or gouty constitutional tendency; and also when the following symptoms present themselves; *headache* deep-seated or frontal, but more especially at the *right side* with *giddiness*, confusion, and humming in the ears; nausea; and inclination to vomit; turgescence of the superficial vessels of the face, or redness only of one cheek; drowsiness; feeling of languor, with great disinclination to exertion, either mental or bodily; cramps of the limbs, especially at night, and weakness in the joints; constipation, and difficulty in passing water; irritability of temper, aggravation of the symptoms in the morning, or after a meal, and also in the open air; bilious, sanguine, or nervous temperament.

*Dose:* A solution of six pills, as directed for *Belladonna*.

OPIUM is a most important remedy in almost all severe attacks, but particularly in old people, when we find the following symptoms: marked congestion to the head, indicated by *stupor*, giddiness, heaviness in the head, and violent pressure in the forehead; singing in the ears and obtuseness of hearing; sleeplessness, or agitating dreams, or frequent and almost overpowering drowsiness during the day; redness of the face, and constipation; pulse slow but full.

*Dose:* Of a solution of six pills to two tablepoonsful of water, give a teaspoonful (or two pills dry on the tongue), every two hours, until improvement or change.

IGNATIA is also indicated by many of the symptoms mentioned under the head of *Nux-vomica*, but it is chiefly called for when depressing emotions (particularly severe, and protracted *grief*), have been the exciting cause, and when the person affected is of a nervous temperament.

*Dose:* Six pills in two tablepoonsful of water, a teaspoonful every four hours, until improvement or change.

## PARALYSIS.

By Paralysis we understand a suspension of nervous action. It differs in character according as one or another or all the nerve trunks are attacked. And its symptoms must vary, just as the functions of the nerves vary. The name paralysis, implies the complete cessation of the action, both of the nerves of sense of feeling, and of the nerves of motion. If only one set of nerves are affected, it is called incomplete paralysis, or *paresis*, one side of the body affected is called hemiplegia. If the upper extremities, or one side and the lower extremities, or the other, are the seat of disease, we call it *transverse paralysis*.

*The Causes* of paralysis are various. Diseases of the brain and spinal cord, are the principal causes. Of these apoplexy, inflammation, and softening of the brain, are most prominent. There are many other influences to which paralysis may be traced as their result. The main causes of this class are: excessive exertions of the parts to which the paralyzed nerve is distributed, in which list must appear cases resulting from convulsions, continued; and excessive pains, swellings, neuralgia, ligatures, a stroke of lightning, rheumatism, histeria, gout, pregnancy, violent acute diseases; among which contagious and miasmatic diseases occupy a front rank, such as scarlatina, measles, variola typhus dysentery and finally poisoning by vegetable, animal, and more particularly by mineral poisons.

*The symptoms* of Paralysis may readily be understood. There can only be doubt, when the paralyzed part is not accessible to our vision. The prognosis depends on the nature of the exciting causes, and upon the possibility of removing them. If from disease of the brain, or spinal cord, a cure is not impossible, but doubtful. If from some acute disease, there is very little doubt of an ultimate cure. That the prognosis is rendered much more doubtful by an advanced age, an enfeebled constitution, and an extension of the paralytic phenomena over a large surface, is but natural to expect.

**TREATMENT.** Paralytic attacks, being almost without any exception, secondary affections, are results following some other disease, or injury. It is evident that in treating them it is of the utmost importance to learn the first, or primary cause of the present affection. It is not always possible to do this, but when the cause is once known, the treatment should be directed to its removal. If it is the result of disease, look for the treatment under the name of that disorder. If from some external cause, study and remove that.

## ALLOPATHIC TREATMENT.

**PARALYSIS.** There are no diseases, the treatment of which ought more certainly to be directed by a judicious physician, than the treatment of the several forms of paralysis.

The treatment, as a matter of necessity, will have reference to the diseased conditions causing the paralysis, the state of the system, and any independent affections which may be co-existing. Treatment is not to be addressed to the inability to make muscular movements directly, but to the cause and associate affections. The nature of the causes must, therefore be determined with positiveness. Among the questions to be settled



before intelligent treatment can be begun, are: Is the cause of paralysis inflammatory, or is there a structural change of tissue (lesion), and where is this lesion or inflammation situated? Is it in the course of a nerve within the skull or spinal canal? If it is a lesion, what is its nature and extent? Is it the result of poison, as lead or arsenic, copper or mercury? Or are all these causes absent and is the paralysis functional? What influence do co-existing diseases have on the paralysis? Is the system well nourished, or is there debility or anæmia? The treatment will vary according to the conclusions arrived at in answer to the above questions, and the result will, therefore, depend upon the correctness of the conclusions, and the judgment with which the indications are carried out. There are cases in which the structural changes (lesions) are such as are beyond hope of repair; in such cases the complete success of treatment cannot be hoped for.

That part of the treatment having reference directly to the paralysis or to the paralyzed parts, and calculated to restore their function, promote the circulation in them and their healthy nutrition are chiefly electricity, passive motion, active exercise under the direction of the will, rubbing, shampooing, and stimulating applications. Strychnia is also given internally for this purpose.

It must be borne in mind that these measures cannot be effectual and may be injurious, so long as the paralysis is maintained by the lesions which caused it.

The general treatment having reference to the causes of the paralysis is considered under their respective heads as *apoplexy*, as a cause of hemiplegia (paralysis of one side of the body) and *myelitis* (inflammation of the spinal cord) as the cause of paraplegia, (paralysis of the lower half of the body.)

The chief remedies are Strychnine and Electricity, but their use should be delayed until the acute stage of the causing disease has passed, though later on both these agents are useful in restoring the circulation to the brain in cases of *thrombosis* (obstruction of the circulation in the brain by inflammation of an artery) or to embolism (obstruction of the circulation in the brain, caused by a plug lodging in an artery) and to promote the absorption of a clot in case of hemorrhage in the brain. For this end, very mild galvanism (the direct electric current) should be used. One pole should be placed upon the nape of the neck and the other upon the forehead, or upon each mastoid process. Strong currents may do serious mischief. But sufficient time having elapsed for the immediate effects of the brain disease to subside, its judicious use will be beneficial. If there is headache or dizziness, the greatest care will be necessary, and in all probability electricity should be discontinued.

It is also important to remember, that part of the paralyzing effects of these causing conditions is temporary, and may be the result of shock, contusion, or congestion, which are temporary. Even paralysis depending upon no appreciable lesion (functional) is, for a time, stationary, before improvement begins. Besides, paralyzed parts do not, of themselves, resume this healthy action, even after the conditions causing the paralysis are removed, so that it will not do to trust to nature alone, but appropriate efforts must be made to restore healthy action.



It is a serious error to begin treatment addressed directly to the paralysis, while that condition is maintained by the primary causes, further than to maintain the nutrition of the paralyzed muscles, by maintaining the circulation in them. It is a serious error to overlook the fact, that after the paralysis has existed some time, that recovery will not take place spontaneously. After paralysis has existed so long that degenerative changes have taken place in the muscles and nerves, recovery cannot take place.

So long as contractions take place upon passing the electric current through the paralyzed muscles, they have not yet reached a condition that renders them hopeless. If pain is produced upon passing the electric current through the paralyzed part, but no contractions are produced, the case is less hopeful than as if both contraction and pain were produced.

The former is called *electro-muscular contractility*, and the latter *electro-muscular sensibility*. When both are lacking, the case may be said to be hopeless.

*Electricity*.—As before stated, the constant current may be applied to the brain for the purpose of improving the circulation and its nutrition (if the case is hemiplegia.) To the muscles usually the induced (or faradic) is used. This will prevent wasting and loss of function from disease, but as a rule, that current should be used which produces the greatest number of contractions and the least amount of pain. If the temperature of the paralyzed part is lowered and the muscles weak and flabby, great benefit in all these particulars will follow the use of the faradic current. Large, well-moistened electrodes should be used, one being placed over the motor nerve affected, and the other over the belly of the muscle. Every affected muscle should be faradized at each setting.

The same principle will govern the use of electricity in all forms of paralysis. In *facial paralysis* one pole should be placed on the mastoid process and with the other stroke the face.

Pain is an evil and the current should not be stronger than necessary to produce contractions. Nor should application be made long enough to one muscle to tire it. From ten to twenty minutes is long enough for an electric setting, nor should any muscle be subjected to the electric current for more than five minutes, nor oftener than every day or every other day.

In infantile paralysis the most decidedly beneficial results are obtained from electricity. The electrical treatment should be begun early, but after all inflammation has subsided. So long as the electro-muscular contractility continues, especially if the joints have not become changed, the spinal cord and the nerve plexuses, as well as the paralyzed muscles should be subject to faradization or galvanization.

*Strychnine*.—Continuous with the use of electricity strychnine should be given. It is most useful in hemiplegia, when the muscles are completely relaxed; when they are rigid it is not to be given. After the acute symptoms disappear strychnine is useful in promoting the nutrition of the nerve or nerve centers affected, as well as by kindling the contractile power of the muscles, whether the paralysis be hemiplegic, paraplegic, or of a local character. The most effectual method of administering strychnine in paralysis is by hypodermic injection. One thirty-

second of a grain a day, by hypodermic injection, has a better effect than the same or a greater quantity three times a day by the mouth. A good formula is: Take of Sulphate of Strychnine one and a half drams, distilled water one ounce. Mix. Apply heat to effect a solution. A drop contains one thirty-second of a grain and can be given once a day by hypodermic injection to an adult. In infantal paralysis one drop of this solution, diluted by five drops of distilled water and given once a day, is very beneficial, if the muscles have not lost their electro-contraction. It promotes the capillary circulation and the growth and power of the muscles.

In making the injection it is best to throw the solution into the muscle itself, taking the paralyzed muscles each in turn. To do this dextrously requires the skill of a physician.

*Passive Motion* in cases of complete paralysis is important, *i. e.* movements of the paralyzed limbs in the *hands* of the attendants or the patient. It aids the circulation and nutrition and maintains them in a state of preparation to respond to the force of the will.

Friction of the surface of the paralyzed limbs, kneading the muscles with a deep pressure, and shampooing, are useful in maintaining nutrition, and should be employed with perseverance.

Persistent voluntary motion, in all cases of incomplete paralysis, is very important. There is reason to believe that in some cases, paralysis continues at a certain point, until it becomes incurable, when persevering exercise with other treatment would have resulted in improvement or recovery. With this view gymnastic exercises are to be enforced. The simplicity of this method does not prevent its being of great benefit.

Cases of paraplegia, in the early stages, should doubtless be treated with Ergot and Belladonna. A teaspoonful of the *fluid extract of Ergot* and ten drops of the *fluid extract of Belladonna* should be given three times a day, but after three or four weeks have passed, they should give place to electricity and strychnine.

In *paralysis of the insane*, there is scarcely any hope of cure from treatment, much less for permanent improvement. These patients should be removed to insane hospitals. The treatment consists, for the most part, of palliative measures, and a regulation of the diet, with a view of retarding the progress of the disease, and contributing, as far as possible, to the comfort of the patient, during the continuance of the malady.

### HOMOEOPATHIC TREATMENT.

Annexed are a few paralytic conditions and remedies, proven to be the best for that condition; a further study may be made by means of the *REPERTORY*. *Causticum*, while not supposed to be able to produce a cure alone, is still one of the most substantial helps in almost all forms of paralysis. When caused by *SUPPRESSED ERUPTIONS* and ulcers, *Caust.*, *Ars.*, *Sul.* After excessive *BODILY EXERTIONS*, *Rhus-tox.*, *Ars.*, *Caust.* After *RHEUMATISM*, *Caust.*, *Fer.*, *Bry.*, *China*, *Arn.*, *Rhus-t.*, and above all, electricity; after apoplexy, *Bell.*, *Nux.*, *Caust.*, *Arn.*

## INFLAMMATION OF THE BRAIN

## BRAIN FEVER. PHRENITIS. MENINGITIS

## MENINGITIS CEREBRALE.

The causes are sometimes veiled in obscurity; at others they are known to be the effects of excessive mental exertions, or the use of alcoholic drinks, or the effect of heat, or sometimes of cold, and other like causes, as mentioned under "Hyperæmia of the Brain."

**SYMPTOMS.**—An attack of this disease may take place either gradually, or very suddenly; generally the former. The premonitory symptoms are, at first, depression of spirits, impaired appetite, mental uneasiness, and confusion of ideas, especially when in the recumbent posture, debility, and sometimes ringing in the ears, and blindness. These are succeeded, in most instances, by a more or less severe chill, and constant headache, which are soon followed by severe fever, hot and dry skin, flushed face, red eyes, or a haggard, anxious, fearful expression of them; the pulse is quick, rapid, and forcible. The intensity of the headache increases, as also the ringing in the ears, sometimes changing to a humming or rumbling sound; the senses become morbidly acute, as known by the sensitiveness or restlessness, as shown on exposure to either light or sound. The pupils of the eyes are constantly contracted, the patient is extremely restless or wakeful, with more or less delirium. They frequently imagine that some one designs to injure them and cannot bear restraint or contradiction, and the delirium is sometimes of a furious, raving nature.

The head is remarkably hot, while the extremities are cold. The tongue is furred white, red at its edges, dry, pointed, and the papillæ elevated; the bowels are obstinately constipated, and nausea and vomiting are common. Respiration is accelerated and laborious, seldom hurried, as in fevers, but irregular and with frequent sighs. Generally there will be spasmodic movements of the muscles, and of the tendons. The urine is scanty and of deep color.

As the disease advances, a change occurs in the symptoms, the previous delirium changes for a stupor which gradually passes into coma. The formerly contracted pupils are now dilated, and there is less sensibility to the light, the eye loses its brightness; sometimes there is squinting, and the countenance is vacant or idiotic; picking at the bedclothes or grasping in the air are almost always present at this stage. The hearing is much diminished, and, indeed, all the senses are very much blunted; the limbs become perfectly relaxed, the pulse is slow, sluggish, and irregular or intermittent, the respiration is deep, slow, and often stertorous (noisy, loud); the urine is very scanty, if passed at all, and the feces are involuntarily discharged. Convulsions or paralytic attacks often ensue.

Finally, the pulse becomes hurried, small, and unequal, the countenance pale and sunken, the skin has a cold and clammy perspiration upon it, the urine flows without any knowledge, the coma becomes more profound and death terminates the scene.

*It must be remembered* that these symptoms vary, being very mild

with some, and extremely violent with others, depending upon the degree of the system, the severity of the cause, and other attending circumstances.

Some care is necessary in discriminating inflammation of the brain from fever of some other form; the headache of brain fever is more constant than that of fever, and appears to be confined to no particular spot. The sleep in this disease is disturbed with bad dreams and sudden starting or waking in fear, and with children a scream on awakening.

THE PROGNOSIS is generally doubtful. Much depends upon the cause of the attack; if it be produced accidentally by blows, etc., it is more favorable than when owing to some constitutional disease or difficulty. The milder the symptoms the more certain is a favorable termination, but we should not be discouraged and despair, even in the worst cases.

### ALLOPATHIC TREATMENT.

TREATMENT OF ACUTE MENINGITIS, CEREBRAL, (inflammation of the membranes of the brain). In the first stage of the disease, the object of treatment will be to diminish the active congestion, and to limit the inflammation and its products. The hair is to be cut close to the head, and cold applied by means of a sack of pounded ice, or constant washing with cold water; the head should also be raised. An active cathartic is to be given: Ten drops of Croton Oil, in syrup or glycerine, is appropriate; or twenty grains of Calomel, in a tablespoonful of Castor Oil, may be given. Owing to the urgency of the case, and the extreme danger to life, if the patient is robust, and the arteries of the head and neck beating violently; in short, if the congestion is intense, blood-letting should be resorted to, preferably by wet cups than general bleeding. The treatment, in this stage, is the same as in the disease called Active Congestion. These measures are only proper in the beginning of the disease, as exhaustion is one cause of death in cases of meningitis which do not die quickly. Food should be of the blandest kind, and taken cold. The restlessness and excitement should be relieved by *Chloral Hydrate* and Bromide of Potassium: Take of Chloral Hydrate eight scruples, Elixir of Bromide of Potassium four ounces. Mix. Dose: one to two dessertspoonsful from two to four hours apart, until relief is obtained. Opium is beneficial in relieving pain, and accomplishes as much as any other remedy, in controlling the inflammation.

After the stage of active congestion is over, the indications for treatment are to support the powers of life, and to promote the absorption of the products of inflammation (lymph and serum) The former indication is to be met, as far as possible, with nutritious, easily-digested food, of which meat essences and extracts, the preparations of milk, and milk beaten with eggs, form the principal part.

Should the drowsiness and insensibility become so profound as to prevent sufficient food being given by the mouth to support life, as is frequently the case, half a pint of these strong liquid forms of food should be given, in addition, by injection into the rectum two or three times a day, and their retention effected by firm pressure upon the anus with a napkin. The absorption of the lymph will be aided by giving



*Iodide of Potassium.* Take of the Saturated Solution of the Iodide of Potassium one ounce, and give five drops in sweetened water flavored with Essence of Peppermint. Strict attention should be given to the bowels, that they do not become constipated. If the bladder is not emptied by nature's efforts, the water should be regularly drawn, twice a day, with a catheter.

Vomiting, during any period of the disease, should be met by a fly blister to the nape of the neck, and a mustard plaster to the stomach. The following mixture is as commonly successful as any internal remedy: Take of Carbolic Acid ten grains, Simple Syrup one ounce. Mix, and give a teaspoonful each hour until relieved.

*Chronic Meningitis, Cerebral:* In all probability this affection is the result of a poison in the system, known as syphilis, either acquired or hereditary, and a history of this constitutional affection should always be sought for. Even when it is not clearly found, if the inflammation cannot be traced positively to another cause, the existence of syphilis is to be suspected and govern the treatment. Iodide of potassium should be given. Take of the Saturated Solution of Iodide of Potassium one ounce, and give at first five drops in sweetened water flavored with Essence of Peppermint, three times a day. Increase the dose by one drop each day until relief is obtained. Thirty or forty drops may be given at a dose, if relief is not sooner obtained. Give after meals.

Quiet of mind and body is necessary. Nutritious food and warm clothing should be provided, and a warm bath be given two or three times a week. If the patient is pale and weak, Iron and bitter tonics should be given. The Citrate of Iron and Quinine is an eligible form in two-grain doses; one dram of the drug dissolved in four ounces of syrup or water, is a convenient mixture. Dose: a teaspoonful given before meals.

Let us repeat, Iodide of Potassium appears to be the remedy for chronic meningitis not dependent upon Tubercle or an injury.

The writer is of the opinion that cauterization, blistering, etc., in this disease, are not, in the slightest degree, beneficial in arresting the disease, but add to the discomfort of the patient. They are not to be used except in obstinate vomiting, when a fly blister should be applied to the nape of the neck.

*Treatment of Tuberculous Meningitis:* This disease, depending upon the presence of tubercular deposit, offers very little encouragement for treatment, if the diagnosis is clear. We are bound, however, to do what we can to give relief. The general principles of the treatment of *acute* and then of *chronic meningitis* obtain, that depletion should not be practiced. Cathartics should be limited to the relief of constipation, which is the rule. For this purpose, Calomel, in one or two-grain doses to a child, and ten grains to an adult, followed, in six hours, by Castor Oil—a teaspoonful to a child; to an adult, a tablespoonful, if the bowels have not opened. In the main, measures to relieve pain and prolong life, are alone indicated.

For the relief of pain, restlessness, etc., the use of Opium, Chloral and Bromide of Potassium, are indicated. The dose of Opium will vary from



one-tenth of a grain to a child a year old, and a grain to an adult, repeated at intervals of two hours, until pain is relieved. Or Chloral Hydrate can be given in combination with Bromide of Potassium, as follows: *Take of Chloral Hydrate two scruples, Iodide of Potassium two scruples, Syrup two ounces.* Mix, and give a teaspoonful, three or four hours apart, to a child one year old. The dose for an adult would be twenty grains of each drug.

To prolong life, stimulants, in doses of a teaspoonful of whisky or brandy, may be given to a child, and one or two tablespoonsful to an adult, in addition to nourishing, easily-digested food—as milk and eggs, either alone or beaten together; cream, meat essences and extracts, and raw lean meat, minced fine.

Preventive treatment is by far the most important and hopeful. It is that for the consumptive predisposition, and is generally hereditary. If a baby, he (or she) should be brought up by a hearty wet nurse, and should not be weaned until he has cut all his teeth. Flannel should be worn next the skin, and the clothes should be warm. Over-exertion of mind and body should be avoided, but free exercise taken in the open air. The diet should be plain and nutritious. Milk should be freely taken. If the patient is reduced or decreasing in strength, Cod Liver Oil should be given. The Syrup of the Phosphates with Iron, is, also, an appropriate remedy. Exposure to measles, and whooping cough, should be avoided, being especially liable to be followed by some form of consumptive disease.

#### HOMEOPATHIC TREATMENT.

With regard to the treatment of this disease, we may begin by stating that medical aid should always be procured, if within reach; but when it is impossible or difficult to secure such assistance, the following remedies may be resorted to:

ACONITE is invariably required at the commencement of the attack when the skin is *hot and dry*, and the pulse rapid, with the ordinary indications of pure *Inflammatory Fever*, which is especially liable to be the case in young plethoric subjects.

*Dose:* Dissolve six globules in three table-spoonsful of water, and give a teaspoonful of the solution every hour, until the pulse diminishes in force and frequency, and the skin becomes moist or covered with profuse perspiration; after which the intervals may be extended to two hours, and the administration be proceeded with, if no other medicine appears to be indicated, until general and progressive improvement becomes apparent. But if any of the subjoined symptoms remain or supervene, consider the following medicines, and select that which is indicated by the symptoms present.

BELLADONNA seems to possess a certain specific influence over inflammation of the brain and its membranes, and is generally the remedy we should select, when the following, amongst other symptoms, present themselves: *great heat of the head*; redness and bloatedness of the face, with *violent pulsations of the arteries of the neck*; *burying the head in the pillow*, and increase of suffering from the *slightest* noise, with extreme sensibility to *light*; violent shooting and burning pains in the head; *eyes red and sparkling*, with protrusion or, *wild expression*; contraction or dilatation of the pupils; *violent and furious delirium*; loss of consciousness; sometimes

low muttering; convulsions,—occasionally symptomatic hydrophobia; vomiting; involuntary evacuations of feces and urine.

*Dose:* Of a solution of six globules to three table-spoonsful of water, give a teaspoonful every two hours, until a change. But if distinct *improvement* supervene (without intervening *apparent aggravation*), the intervals should be extended to four hours, and, again, after two more doses,—if the amelioration be regularly progressive—to eight hours; and so on, until permanent improvement or change. But, in very urgent cases, and when repeated doses of *Belladonna* have produced inadequate results, consider the next medicine, and proceed accordingly. If in *alternation* with *Zincum*, a similar solution of each (separately) administered by tea-spoonsful, at intervals of half an hour (or even of fifteen minutes), in rotation, until the *urgent symptoms* abate.

ZINCUM may be had recourse to, after, or in alternation with *Belladonna*, when that remedy effects only partial amendment. In those extreme cases where symptoms of threatening paralysis of the brain are manifested by the following indications: loss of consciousness—half-closed eyes—dilated, insensible pupils—*icy coldness of the extremities, or of the entire surface of the body—blueness of the hands and feet; impeded respiration; small, weak, scarcely-perceptible pulse*—*Zincum* has been found, effectual in averting a fatal issue.

*Dose:* If *singly*, dissolve six globules in three tea-spoonsful of water—and give a tea-spoonful of the solution (or, otherwise, three globules dry on the tongue), every hour (or in very urgent cases even every quarter of an hour), until the *lividity* and *coldness*, and the indications of the pulse assume a more natural aspect,—and then every three hours, until general improvement or change. If in *alternation* with *Belladonna*, as directed for that medicine.

BRYONIA. This remedy will frequently be found of great efficacy in children, when *Aconite* and *Belladonna* have produced but trivial improvement, and the symptoms manifested resemble those enumerated in the article on WATER ON THE BRAIN.

*Dose:* Dissolve six globules in four tea-spoonsful of water, and give a tea-spoonful of the solution every two hours, until amelioration or change; but if partial improvement only should become apparent within two hours after the third dose of *Bryonia*, pause two hours longer, and proceed with the next medicine.

HELLEBORUS-NIGER is required after *Bryonia* in cases exhibiting the characteristic features of Water on the Brain, when the last named medicine has been inadequate to overcome the disease. In such cases, and when partial improvement only has resulted from the previous administration of *Bryonia*, *Helleborus* should be given four hours after the third dose of the last-named medicine.

*Dose:* As directed for *Bryonia*.

HYOSCYAMUS is appropriate when there are,—*drowsiness, loss of consciousness*, delirium about one's own affairs—inarticulate speech—tongue coated white, with frothy mucus about the lips—dilation of the pupils—fixedness of vision—skin dry and parched—redness of the face, and picking of the bed clothes with the fingers.

*Dose:* Of a solution of six globules to two table-spoonsful of water, give a teaspoonful every one to three hours, until amelioration or change.

**OPIUM.** When there is *lethargic sleep*, with snoring respiration; *half-open eyes*, and confusion or giddiness after waking; congestion of blood to the head; complete apathy and absence of complaint.

*Dose:* Of a solution of six globules to two table-spoonsful of water, give a tea-spoonful (or otherwise three globules dry on the tongue), every hour, until amelioration or change.

**STRAMONIUM.** When there is starting or jerking in the limbs; sleep almost natural, followed by absence of mind after waking, but sometimes attended with moaning and tossing about; vision fixed, and the patient frequently appears in a state of dread, and utters cries; redness of the face; feverish heat, with moisture of the skin. In many of the symptoms this remedy bears a close resemblance to *Belladonna*, with the exception of being indicated by signs of a more spasmodic character, and by less acute pain in the head.

*Dose:* As directed for *Hyoscyamus*.

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## HYDROCEPHALUS.

### DROPSY OF THE BRAIN. WATER ON THE BRAIN.

In general we understand by Hydrocephalus every unhealthy accumulation of fluid in the cavity of the skull. It may be either acquired or exist from *earliest* life.

*Acquired* Hydrocephalus is seldom an independent disease, but rather is generally symptomatic of some other constitutional disease. It becomes an important symptom when the disease sets in as a chief complication in meningitis; or when it develops itself so rapidly that it acts like apoplexy, and speedily terminates fatally, (when it would be called *serous apoplexy*.) It is very hard, indeed, always uncertain to diagnose this disease. It scarcely ever calls for a special treatment, and had better be treated without medicines by means of care and diet.

Congenital hydrocephalus (that which exists from earliest life) commences before the child is born, but may increase after birth.

The quantity of accumulated fluid may be very large, and hence the skull may acquire an extraordinary size. Its effects upon the child are sometimes imperceptible, but at other times very decided; the mental actions of the brain are mostly involved. It is only in very fully developed cases that the motions of the muscles are interfered with, in which cases a more or less complete paralysis sets in. The life of the patient is not absolutely threatened; it may be admitted that hydrocephalic children, who have got over the period of infancy, have pretty nearly escaped the most imminent danger of death from this immediate cause. But they always remain weakly, irritable, and unusually disposed to frequent and malignant diseases. Hydrocephalus, or dropsy of the brain, is a curable disease, but such a cure is mostly spontaneous, taking place in proportion as the bodily development progresses, and if the *body* does not develop, the limbs remaining small, or paralyzed, the chances of cure are proportionately less. A cure may indeed be facilitated by artificial means, but not by medicines. A main point is to bring up such children with great care, to accustom them to light and nourishing food and to

active bodily exercise, and not to excite their mental faculties until the body is well developed. Such children should not be allowed to attend school until they are fourteen or fifteen years of age, and there need be no uneasiness about them falling behind their companions of the same age. If so held back they will, almost without exception, excel in study when permitted to apply themselves.

Among medicines, if we do use them at all, there are none which offer more hope than *Carbonate of Lime* (Calcaria Carb.), and Arsenicum, but they must be given in small and very rarely repeated doses. *Do not* bandage the head of infants *tightly* for this disease. A very moderate bandage, in very early life, will likely be beneficial, while the tight bandage will be likely to cause inflammation and death.

#### ALLOPATHIC TREATMENT.

This disease unfortunately gives very little hope of benefit from treatment. Physicing, bleeding, blisters, and salivation are to be avoided. Gentle laxatives or injections should be depended on to keep the bowels open. Plain nourishing food and Cod Liver Oil or Cream should be given. A child can take a teaspoonful of Cod Liver Oil, two or three times a day, while a tablespoonful is enough for an adult. The active remedies which appear the most useful are Iodide of Potassium and Iron. A convenient prescription for a child is: *Take of Iodide of Potassium thirty-two grains, Phosphate of Iron sixteen grains. Dissolve each salt in a little water separately, then mix and add simple syrup sufficient to make a two ounce mixture. Give a teaspoon half full four times a day, to a child one year old.* One drop each of the Tincture of Squills and Tincture of Digitalis can be given to a child three or four times a day to keep the kidneys active.

As a last resort, the physician would be barely justified in resorting to puncturing, to draw the water, and compressing the head by strapping.

*Preventive* measures should be closely followed. The strength of the child having a tendency to hydrocephalus, should be increased as far as possible. Nourishing food with as much milk as can be digested, meats, and, if the child is reduced in strength, Cod Liver Oil should be given. Warm clothing, a daily bath, good sleep every night, in a well ventilated room, and exercise in the fresh air, are all helpful. Stimulants should be avoided. When the child has become of an age to commence its education (7 or 8 years) only short and varied lessons should be given, and mental fatigue avoided.

*Congenital Hydrocephalus, or dropsy of the brain.*—If the disease is congenital (from birth), it may be questioned whether anything should be done to relieve the infant, except attending to its general health. There are medicines which, in many instances, diminish watery accumulations in internal cavities; the parents are very anxious for the recovery of the little one; some recoveries are reported. These facts, and the hopelessness of the disease, if left to nature alone, lead the physician to resort to medicinal treatment.

Medicines which act on the kidneys (diuretics) are generally supposed to be called for, and with reason. The best of these is Iodide of Potassium, as an efficient diuretic, and, possibly having a direct influence



over the disease. The dose for a child, six months or a year old, is one or two grains three to six hours apart, dissolved in a half teaspoonful of syrup of peppermint.

Pressure of the head by a closely fitting cap, or very narrow strips of adhesive plaster (one-third of an inch wide) and applied evenly over the skull, from side to side, and then from back of the neck to the orbit may be of great use. Care in the use of pressure should be exercised not to produce compression of the brain. If pressure is tolerated, and health good, the prospect is better. Generally the fluid accumulates so the straps must be loosened in two or three days. This process should be managed by a physician.

Tapping is sometimes resorted to, and, also, sometimes after the removal of the fluid a solution of Iodine,  $\frac{1}{3}$  of a grain, and Iodide of Potassium 1 grain, to an ounce of distilled water. This requires a physician.

I can see no indication for irritating applications.

Attention to the general health is necessary. Constipation of the bowels should be relieved by an occasional purgative, as a half teaspoonful of Rochelle Salts; three to five grains of Calomel, or a teaspoonful of Castor Oil. The diet should be of the breast milk, with cream or Cod Liver Oil, and raw meat minced fine.

The treatment of acquired dropsy of the brain will be noticed in the diseases leading to this affection. Generally there is but little encouragement for treatment. Diuretics are called for. Iodide of Potassium and Acetate of Potash, are the best; the dose of the former is one or two grains, and the latter three to six grains, four to six times a day.

Blistering should be produced behind the ears with the Blistering Collodion. Active congestion will call for cold to the head, cathartics and Bromide of Potassium in doses of five to ten grains, three or four hours apart, for a child a year old. Constipation should be relieved.

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## TETANUS.

### TRISMUS. LOCK-JAW.

A painful disease, the leading symptom of which is persistent spasm of the voluntary muscles. When the muscles of the lower jaw are affected it is called *trismus* or *lock-jaw*.

The disorder is chiefly occasioned, either by exposure to cold or by some irritation of the nerves resulting from local injury, particularly of tendinous parts, (example in the hand or foot), it is then called traumatic tetanus or traumatic trismus. The amputation of a limb, or the pulling on a nerve by some ligature used in tying some of the blood vessels, cut into either accidentally or during some surgical operation. When it takes place in consequence of such a cause, or from any other external injury, the symptoms *generally* set in about the eighth day, sometimes later, but when they follow exposure to cold, they usually set in much earlier. In some cases the attack comes on suddenly, and with extreme violence, but it more generally approaches gradually, a slight stiffness being first experienced in the back of the neck, with an uneasy sensation at the root of the tongue, and a difficulty in performing the act of swallowing,



an oppressive tightness is complained of across the breast or in the chest, with a pain at the lower end of the breast-bone, or in the pit of stomach, (scrobiculus cordis), extending into the back, the breathing is hindered, the face pale, pulse small, bowels constipated and urine high-colored; a stiffness takes place in the lower jaw, which soon increases to such an extent and presses the jaws so closely together that the smallest opening is unattainable, and *now* the patient has the lock-jaw. In some cases the spasmodic contractions proceed no further; in others they return with great frequency and intense severity, and also extend to the arms, the abdominal muscles, the back and lower extremities, so as to bend the body forcibly backward (OPISTHOTONOS), even to such a degree that the back of the head touches the heels, or forward (EMPROSTHOTONOS) until his nose touches his toes, or sideways (PLEUROSTHOTONOS). Finally the arms, lower extremities, head and trunk become rigidly extended, caused by an equal contraction of all the muscles. The tongue is also seized with spasm, and is, not unfrequently, injured by the teeth becoming clenched together just as it happens to be convulsively darted out. As the affection advances the eyes become fixed and immovable, the whole countenance is frightfully distorted and expressive of extreme anguish, the pulse irregular, the strength completely exhausted, and a termination is put to the sufferings generally about the fourth day, in acute cases, by one concentrated spasm. In some cases the fatal termination is protracted considerably beyond the stated period.

The spasmodic action does not continue unremittently, the muscular contractions occasionally admitting of some abatement, but is generally renewed as soon as the patient makes an effort to speak, drink or move.

PROGNOSIS.—This disease is so intractable that under any known treatment, the most stolid practitioner can but consider the attack as unfortunate in the extreme, and his prognosis *must* be unfavorable, although not always *fatal*.

#### ALLOPATHIC TREATMENT.

“LOCK-JAW” is so dangerous an affection, that none would scarcely venture to assume the responsibility of the treatment, unless he be a physician, such a person would be foolhardy.

Most, if not all, plans of treatment prove unsuccessful in a large proportion of cases. The remedies which appear to be most successful are: *Bromide of Potassium* and *Hydrate of Chloral*. Forty grains of Bromide of Potassium, dissolved in water with syrup or sugar, should be given every two or three hours, or a dram (60 grains) every three or four hours apart, during the day, until half an ounce (240 grains) has been given. At bedtime a full dose of Chloral Hydrate, forty grains, dissolved in water with syrup or sugar, should be given for the purpose of securing sleep. In the morning, thirty grains of Chloral may be given, if the temperature reaches 101° Fahrenheit.

*Nitrite of Amyl* has been used with success in a very limited number of cases. It appears to control the spasms and may be administered by inhalation, three to six drops on a handkerchief. A fullness of the head dictates the removal of the handkerchief. It should be repeated suffi-

ciently often to relieve the spasms. I would recommend giving Chloral Hydrate at bed time, as directed above, even if the nitrite is depended on.

*Calabar bean.*—Of late years this remedy has come largely into vogue in the treatment of tetanus. Out of fifty-nine cases treated with this drug thirty-two recovered. Dr. Fraser recommends beginning with one-third of a grain of the extract by subcutaneous injection, and increase the dose continuously until the reflex excitability is sensibly diminished, then continue the injections at that dose. In milder cases the medicine may be continued by the mouth in doses three times as large as the largest given by hypodermic injection. It is possible that if a good quality of extract could be used every time the result would be better.

In all cases attention should be strictly paid to nourishing the patient and so support the powers of life. Four ounces ( $\frac{1}{2}$  of a pint) of good, rich milk with brandy, should be given every four hours, and a raw egg beat with milk and brandy, four times in the twenty-four hours.

In cases of traumatic tetanus (caused by injury), all remaining sources of irritation, such as fragments of bone, bullets, pieces of cloth, or any thing else should be removed. Oftentimes the surgeon is justified in amputating the injured part, as a means of cure of the lock-jaw. This procedure is the more hopeful, if the spasm is confined to the jaw.

*Tetanus of infants* is best prevented by cleanliness, warmth, fresh air and dry apartments. On southern plantations, where the disease appears endemic, it is arrested by having the cabins whitewashed with lime both inside and out; raising the floors up from the ground that air may circulate freely under them; removing all filth from and about the houses; particular attention to cleanliness of the bedding and clothing of the mother and child, and preventing any matter from the navel coming and remaining in contact with the skin. A warm or tepid bath should be given the child daily. A dressing of one part turpentine and two parts sweet oil or lard is highly recommended.

After the disease has become developed, the foregoing hygienic measures should be carried out rigidly. The medicinal agents, which in my judgment are preferable to all others, are the Bromide of Potassium and Hydrate of Chloral given after the same manner as directed for adults. The dose for an infant would be three grains given every two or three hours, which may be increased to five, or even ten, grains, if the spasms are not relieved.

When desirable to produce sleep I would give two grains of Hydrate of Chloral with the Bromide of Potassium until sleep takes place. After a couple of doses of the Hydrate of Chloral, if sleep has not taken place, the dose should be gradually increased until five or six grains are given, or until the desired effect is reached, namely, sleep. Eight scruples of the Bromide of Potassium dissolved in two ounces of simple syrup contains ten grains to a teaspoonful. Of this mixture one fourth of a teaspoonful will be a dose to begin with. Six scruples of hydrate of chloral dissolved in two ounces of syrup gives eight grains to the teaspoonful and one fourth of a teaspoonful the dose to begin with. If the spasms are so severe that the child cannot swallow, I would not hesitate to give at once, by injection, a teaspoonful of the Bromide of Potassium

mixture and a half teaspoonful of hydrate of chloral mixture. The disease is very dangerous, too dangerous to be treated without a physician.

A blister the size of a dollar over the navel is said to be useful when the disease does not yield to remedies by the mouth.

The spine may also be thoroughly rubbed with some stimulating applications, as turpentine, or hartshorn liniment.

Brandy should be given in doses of ten drops to half a teaspoonful with milk or beef essence at short intervals to prevent the rapid exhaustion of the disease.

#### HOMEOPATHIC TREATMENT.

ACONITE is useful in lock-jaw where there is frequent alternation of red and pale face with distorted eyes, thumb turned into the palm of the hand, and the hand clenched, pulse full and bounding.

ARNICA.—In cases arising from an injury, such as a true bruise or cut of the flesh, or the puncture of a needle, pin, hay fork, or like sharp-pointed instrument, it should be given internally, 10 drops in a  $\frac{1}{4}$  glass of water, two teaspoonsful every hour or half hour, if the case is urgent, at the same time it should be applied externally to the wound; take one part tincture arnica to five parts water, moisten a soft cloth, and keep it on the parts injured.

OPIUM.—Is a useful remedy in some of the severest forms of tetanus as well as lock-jaw, either from an injury or from a cold. The muscles of the whole body tremble, there is foam at the mouth, and finally the whole body is bent backward in the form of an arch, when opium is useful.

*Nux Vomica* or *Strichnia*.—When there are extremely severe spasms followed by a short period of relaxation, then another spasm at periods of three to six minutes.

BELLADONNA.—In attacks of trismus among children, when a jar of the bed will bring on a spasm.

#### DELIRIUM TREMENS.

This is a disease frequently occurring in persons who are in the habit of using intoxicating liquors, even when they do not drink enough, at any one time, to become intoxicated. It is a dangerous disease which frequently destroys life, or causes a state of insanity.

Symptoms: It usually commences with some degree of nausea, vomiting and loss of appetite, especially for breakfast, which are, sooner or later, followed by constant wakefulness, incessant talking, walking about restlessly, and, sometimes, raving from the first. There is a constant trembling and unsteadiness of the limbs; the hand is unsteady; the tongue is tremulous when protruded; the walk is staggering; the skin is cold, and the pulse is weak and rapid.

As the disease progresses, the symptoms become worse; the patient is not silent for a moment; he is constantly talking, scolding or laughing; changing from one thing to another, rapidly; arranging his clothes, room, bed, etc., with more or less agitation and mental suffering. He

imagines the presence of things which he knows are mere illusions, or they may appear so real as, for a time, to make him actually believe that they truly exist; but, most generally, this deranged perception may be explained away, for the moment, by some kind friend. Among these imaginary objects, are: rats, mice, serpents, fiends, witches, guns, dragons, bugs, insects, etc., to free himself from which he will have the most fearful struggles, with expressions of disgust, distress, and even fear and horror. It is impossible to name the various fancies which he creates; at one time laughing, at another begging, with tears in his eyes, for life; then humbly asking pardon for some imaginary wrong. Again, pointing, with raving expressions, to the objects conjured up in his disordered mind; and, finally, raving almost like a maniac.

His eyes are bloodshot and in constant motion, with a peculiar glare, glancing fearfully and suspiciously, at every object around him; the countenance, is usually, pale, haggard and distressed, the tongue coated with a thick, yellowish mucus, the head hot, and the bowels costive, with occasionally nausea and vomiting.

If the patient is not relieved, he becomes worn out and is compelled to lie down from sheer weakness, and may die suddenly, in an apoplectic or epileptic fit, or, he may gradually sink, the surface becoming cold, with clammy sweats, low, muttering delirium stupor, picking at the bedclothes, twitching of the tendons and *death*. Sometimes the first symptom is an epileptic fit, or apoplexy, on recovery from which, well marked delirium tremens occur.

The development of the disease most frequently follows a sudden abstinence from the use of liquors, among those who have become addicted to their excessive use, by which means the brain becomes excessively weakened and impaired.

It likewise frequently happens while the person is in the full tide of his "sprees" and, also, occasionally after a continued but moderate use of alcoholic drinks. It usually comes on in from one to five days after the discontinuance of the inordinate alcoholic excitement.

In the treatment of a patient with delirium tremens, opposition and the use of force should be avoided as much as possible, because they give rise to irritation, and increase the difficulty. Gentle and persuasive measures are the best, with a degree of firmness; and at no time must you yield to the fancies of the patient, but rather reason or laugh them out of them. This course will accomplish much more than an opposite one. Take of the Sulphate of Quinine eight grains, Sulphate of Morphia one grain, mix and divide into four powders: one of these powders should be given every hour, for two or three doses; afterward, lengthening the time, so that too much Morphine be not given. Give the patient, shortly after the first powder, a tablespoonful of good brandy in water and sugar, *as a reward* for a promise from him that he will lie still and try to go to sleep; repeat, if need be, until he does sleep; then let him rest three hours; after he awakes, give light food.

#### ALLOPATHIC TREATMENT.

The success of treatment in this disease, attended with prostration, depends on *nourishment*, relieving the restlessness, and inducing sleep.



Milk, raw eggs, beef essence, or strong beef tea, should be freely given. Both the ends are aided by the administration of Quinine, in two or three grain doses every three or four hours. The nervousness and restlessness, preceding the active delirium, is best relieved by the Bromide of Potassium, during the course of the disease; it is, also, equally useful to relieve the same symptom; but, to be effectual, it must be given in doses of forty to sixty grains, every four hours, dissolved in water or syrup. For the production of sleep, there is no remedy so uniformly successful as Hydrate of Chloral, given with the Bromide of Potassium, in doses of twenty to thirty grains. In old drunkards, it should be used with great caution. After a second dose of thirty grains of Chloral, if sleep is not induced, Morphine, in doses of one-third of a grain, may be given, and repeated, if necessary, in two or three hours. It is best given by hypodermic injection. However necessary sleep and quiet is, it is still more necessary to establish digestion, and support the powers of life, by suitable nutrition. In most cases, this, of itself, will quiet the delirium, induce sleep and carry the patient to recovery.

DIGITALIS is found useful in this disease, in doses of a teaspoonful of the tincture, or a tablespoonful of the infusion, made to two drams of the leaves to a pint of hot water. After four hours, the dose may be repeated. Pouring cold water on the head, and the free use of hop tea, are frequently of advantage in quieting the delirium.

The patient should be treated kindly, and left in charge of an attendant in whom he has confidence. Visitors should be excluded from his room.

TREATMENT OF ALCOHOLISM.—The chief point in the treatment of the mania for drink is to enforce at once *total abstinence*; this is more easy than to practice moderation.

The sleeplessness may be guarded against by forty to sixty grain doses of Bromide of Potassium at bed time. If necessary, with this can be combined fifteen to twenty grains of Hydrate of Chloral, or two teaspoonsful to a tablespoonful of Tincture of Hyoscyamus, gradually diminishing the dose as the symptoms disappear. Tonics should also be given. Of these the Citrate of Iron and Quinine, in doses of five grains, dissolved in water or syrup, two drams and a half to eight ounces; dose, a dessert-spoonful three times a day.

The Phosphate of Zinc with extract of Nux Vomica in pill form, a quarter to half a grain of the former, and a quarter of a grain of the latter, three or four times a day, will aid greatly in restoring the nervous system to a healthy state. The diet should be strong and nourishing, consisting largely of milk and eggs, beans, oatmeal, wheat and vegetables, with an absence of lean meat. This rule of diet should be observed after health is established.

There is no more deplorable practice, both among physicians or in domestic practice, than the frequent giving or taking of alcoholic stimulants. It is not to be doubted that a habit of using liquors as a beverage not infrequently begins by "taking a little brandy and water occasionally," or "a glass or two of wine," for low spirits or a temporary indisposition. The practice is both harmful and useless.



## HOMCEOPATHIC TREATMENT.

## SPECIAL INDICATIONS.

*Arsenicum*.—Pale, yellow complexion; bloated face, and cold, blue skin; fainting fits, particularly during vomiting. The patient imagines that vermine are crawling about the bed, and ugly animals are staring him in the face. Great *restlessness* and *fear of death*. Extreme thirst; drinks little and often.

*Dose*: Six pills to a tablespoonful of water, one teaspoonful every thirty minutes.

*Bolladonna*.—Persons of a full, plethoric habit of body. Flushed face and red eyes, with dilated pupils. Boisterous delirium, with desire to escape. He tears the clothes, strikes, bites and shrieks, in his rage. Sudden starting and jumping, while sleeping.

*Dose*: As for Arsenicum.

*Camphor*.—Features distorted; eyes sunken; face, hands and feet, icy cold. Confusion of ideas; maniacal delirium; convulsions; frothing at the mouth, and insensibility. Retention of urine, with constant desire to pass water.

*Dose*: A drop or two, on a little lump of sugar, every hour.

*Hyoscyamus*.—Twitching and jerking of the muscles, especially of those about the face and eyes. *Furious delirium*, with wild, staring look; dilated pupils, and throbbing of the carotid arteries. Grasping at imaginary objects; muttering.

*Dose*: As directed for Arsenicum.

*Nux-vomica*.—Trembling of the limbs, and spasmodic twitching of different parts of the body. Incapable of thinking correctly. Makes frequent mistakes in talking. Delirium, with frightful visions, and efforts to escape. Very irritable, and wants to be alone. Constipation with *large* and difficult stools. Apprehensive of death.

*Dose*: Double that recommended for Arsenicum.

The best remedies for the inclination to drink, and the evil effects of drunkenness, are Ars., Nux-v., Sulph.



## EPILEPSY.

## MORBUS DIVINAS, MORBUS HERCULEUS.

This is a disease marked by sudden and temporary seizures of unconsciousness, accompanied by convulsions, and is one of the most terrible diseases that afflict mankind. There are so many varieties of epilepsy that it is impossible to give a definition of the disease that will apply to them all. In most cases it is characterized by convulsions and loss of consciousness, occurring at longer, or shorter intervals, during which the patient is almost in good health. The absence of fever in epileptics serves to distinguish their affection, meningitis, and other inflammations accompanied by convulsions. The complete loss of consciousness, also, dis-

tinguishes epilepsy from hysteria, as in most nervous diseases, a hereditary tendency is among the most frequent predisposing causes of epilepsy. Epilepsy often appears in the offspring of persons who have had various other nervous complaints, such as epilepsy, insanity, paralysis, apoplexy, and hysteria. There is no doubt that women are much more frequently attacked with this disease, than men. The most frequent periods, at which epilepsy begins, are early infancy, and puberty, although, no period of life is exempt from its first attacks. Various malformations of the body, and especially of the cranium, are certainly *among* the most frequent predisposing causes. Weak constitutions are favorable to the production of epilepsy. Among other predisposing causes, are dentition, the first appearance, and the cessation of menstruation, onanism, and the abuse of alcoholic drinks. Almost all kinds of diseases *may* produce epilepsy, but among the principal, we must place those affections in which the blood becomes altered, or diminished, and organic affection of the cerebro-spinal axis, and of other certain parts of this nervous system. Another powerful cause, is excessive loss of blood. Pregnancy, parturition, (confinement), menstruation, frequently cause epilepsy. A tumor, or a nerve, or any cause of irritation on the trunk, or the terminal part of any sensitive nerve, and especially, in the skin, or mucous membrane very often produces it. A wound, a burn, worms in the bowels, or elsewhere, stone in the bladder, or in other places, foreign matter in the ear, etc., are known to have caused epilepsy. It is quite certain that great mental excitement has originated it in many cases, but it seems probable that the disease was not introduced by those causes, but was only brought on by them to manifest itself.

When a fit is about to take place, it is usually preceded by some sensation, or some change in the mind of the patient. If a sensation precedes the fit, it comes most frequently from some part of the skin, and especially from that of the fingers and toes. This sensation is well known under the name of *aura epileptica*. There is as much variation in the kind, and intensity of the sensation, as in its point of starting. Most frequently the *aura* is a sensation of cold, or burning, or that kind of sensation produced by a draft of cold air on a limited part of the body. Sometimes the *aura* starts from the eye or the ear, and then a flash of light, or some other sensation comes from the retina, or peculiar sounds are heard. The stomach and bowels are also often the starting point of the *aura*. Some epileptics become gay, others mournful when they are about to have a fit; in others, the attack is announced by some change in the digestive function. A complete attack, usually begins with an extreme paleness of the face, and at the same time, or nearly so, there are contractions of several muscles of the face, the eye, and the neck. Observers do not agree as regards the first manifestation of a fit, probably, because the seizure does not always begin with the same phenomena. Not only have we known the first symptom, not to be the same in different epileptics, but in the same one we have seen differences, in three different attacks. Many physicians think the scream, the first symptom. It often is, but the paleness of the face usually precedes it. Some epileptics do not scream; as soon as these symptoms have appeared a rigid spasm takes place in the limbs, and the patient falls. Respiration is suspended, and the face becomes quite in-

jected with black blood, and assumes a hideous aspect, both from the spasm of its muscles and its blackish, or bluish hue. Sometimes a momentary relaxation is then observed in the limbs, but all at once clonic (jerk-ing), convulsions occur everywhere in the trunks, the limbs, the face, and often, in the various internal organs, as the bladder, the bowels and the uterus.

The mouth then ejects a frothy saliva, often reddened with blood from the bitten tongue. The respiratory muscles, after the first spasms which produce the scream, and suffocation, causing a gurgling or hissing sound, become relaxed and then those employed in inspiration contract, and almost as soon as air has reached the lungs, the convulsions cease or notably diminish. Ordinarily the fit is over in a few minutes, but it is not unfrequently the case, that after a general relaxation, another seizure comes on, and sometimes many occur with very short intermissions. During the whole time the fit lasts, the patient is deprived of consciousness, and when he recovers he remembers nothing that has taken place in the meantime. In some cases the seizure is followed by prolonged coma ending sometimes in death.

When a patient recovers from a fit, even if it has not been very severe, he usually feels fatigue and suffers from headache. Fortunately he soon falls asleep, and ordinarily is almost as well as usual, when he wakes up, except that the headache and fatigue still continue, though much diminished. When many fits have taken place, even at somewhat long intervals, such as several weeks mental derangement often supervenes, and in this way epilepsy often leads to insanity. In some cases the fits recur at regular periods, in others they return with every return of the circumstances which seem to have caused the first, such as menstruation, pregnancy, the influence of certain seasons, etc. There is sometimes, although seldom, perfect regularity in the length of the intervals between the fits, and they come every day, every week, every month etc., at irregular hours. Many patients have very different intervals between their successive fits. Some have many fits a day, others every six months or every year. The greater the number of fits, the less violent they generally are. In the complete fit of epilepsy there are two distinct features. 1. The loss of consciousness; 2. The muscular convulsions. Each of these may exist alone. In the case of a seizure consisting only in the loss of consciousness, without convulsions, we have the so-called *epileptic vertigo*, which is a form of epilepsy which frequently exists alone, and also co-exists often with the form of the disease in which the attack is complete. In this last case the patient sometimes has a complete seizure, sometimes only an attack of vertigo. Whether vertigo exist alone or co-exists with complete attacks, it is very dangerous, not for the life of the patient, but because fits of simple vertigo lead more frequently to insanity than complete fits of epilepsy. The cases of epileptiform convulsions without loss of consciousness are not so frequent as the cases of simple vertigo. They are particularly produced by injuries to the nerves or spinal cord.

The first thing to be done for an epileptic fit, is to find out, if possible, the cause which produced the attack, and, if it still exists, try to get rid of it. Very often epilepsy depends on some external cause of irritation,

which may easily be removed. It is of the greatest importance to discover if there is anywhere such an irritation, and as the patient may not be aware of its existence, it is necessary to look for it everywhere. This is a proper place to point out the fact, not generally known among the masses of the people, that onanism or self-abuse, among children and young people of both sexes is one of the most prolific causes of this truly terrible disease, and if the patient can be induced by any means to break away from the practice in any reasonable time, the epilepsy is virtually cured. Parents should not rest easy under the impression that *their* children would not be guilty of such a thing, but *know of a certainty* that such is not the case. My young friend, troubled with epilepsy, *you know* whether this is one of your habits, contracted by the influence of companions in school or elsewhere, and if such is the case, you may rest assured that *if you continue* in the habit, absolute and certain ruin of your body and mind are the inevitable consequences. Patients and their families should remember that the rules of hygiene must be followed much more closely by epileptics than by those afflicted by almost any other disease.

#### ALLOPATHIC TREATMENT.

The treatment of Epilepsy will have reference to the management of the paroxysms (fits), and, also, to measures for effecting a cure, which are to be employed during the intervals between the fits. During the fit the patient should be laid on a large bed, or even on the floor, where the fresh air can freely circulate around him. No effort should be made to restrain the convulsive movements. The necktie and all tight clothing should be loosened. A cork, roll of linen, or piece of soft wool should be held between the teeth to prevent the patient biting the tongue. Cooling washes may be applied to the head.

In those cases which have a brief warning of an approaching fit (which is called the *aura epileptica*) the paroxysm may be warded off by inhaling *nitrate of amyl* at the beginning of the warning. The patient should carry a small vial of nitrate of amyl and inhale from three to five drops upon a handkerchief. The handkerchief should be removed when fullness of the head is experienced. Also those cases characterized by frequent repetition of the fits the same remedy is very useful in stopping their recurrence. It is also recommended as a means of mitigating severe attacks, but in advanced stages of the paroxysms, it should be used very cautiously, and the writer cannot recommend it for domestic use. But of all the remedies which enjoy a reputation for preventing or mitigating a fit, this occupies the first rank.

Among other remedies which are recommended for the purpose of preventing a fit, Chloric Ether, Hoffman's Anodyne and Fluid Extract of Valerian, are to be mentioned, the dose of Ether is a teaspoonful. These same remedies are, also, used to prevent the frequent recurrence of paroxysms before alluded to; Tinctures of Belladonna or Opium are said to be useful for this end, given in doses of from fifteen to thirty drops. The physician is often led to try the inhalation of Chloroform. But all these remedies are, in my opinion, inferior to Nitrate of Amyl. If other measures fail, or are not at hand, compression of the carotid arteries may be



tried, first upon one side of the neck, for ten or fifteen minutes, and then upon the other side. If the convulsions are very severe, both arteries may be compressed at once. The compression is produced by pressing the artery, with the finger or thumb, firmly against the spinal column.

The treatment of epilepsy, as far as a permanent cure is concerned, has not been very successful. Endeavor must be made to improve the patient's general health, and to this end all the vital functions must be carefully enquired into, with all the penetration of the most skillful physician. All advanced physicians are agreed that every thing which depresses the vital powers does harm. The habits of life must be regular and moderate; daily exercise; early hours, and plenty of sleep; quiet occupation; attention must be given to regularity of the bowels, and urinary secretion. Mental excitement should be avoided, and if the patient is a child, be kept from school. The diet should be simple, but generous and nutritious, including animal food, milk and eggs. Frequent bathing, two or three times a week, should be practiced.

The habits of life which are pernicious, and may stand in a causative relation to epilepsy, and are to be prohibited, are: over-tasking of the mind or body, either undue exposure or sedentary habits, the free use of alcoholic liquors, or tobacco, and sexual excesses, or self-pollution.

There is no better established fact, in the healing art, than the benefit of the Bromides (usually the Bromide of Potassium) in the treatment of epilepsy. It is not to be understood that the remedy is infallible, but it is true that it has been more useful than all other remedies combined. It is well determined that Bromide of Potassium is most valuable in those cases of epilepsy which are characterized by violent and frequent convulsions. It is also noticed that the beneficial effect of the remedy is more marked in attacks occurring in the day time than those occurring at night. The nice discrimination, in the use of remedies in epilepsy, requires the skill of an accomplished physician. But, roughly, it may be said, that Bromide of Potassium should be given in all cases which have a congested, (flushed), or full appearance of the face, rush of blood to the head, (or more accurately to the brain, this is most accurately determined by the physician, by examination with the ophthalmoscope). The dose of the Bromide of Potassium at the beginning, should be about fifteen or twenty grains three times a day, increasing the dose by ten grains each week, until from forty to sixty grains are taken at a dose, three or four times a day. The medicine should be continued in these doses until the peculiar effects of the drug (called bromism), are produced, or the fits have ceased. Bromism is shown by mental weakness, heaviness of intellect, failure of memory, partial loss of voice, drowsiness, depression of spirits, pallor and an eruption of the skin and sometimes by abscesses. The remedy, if it prevents the fits, should be continued for several weeks, or even months, at the dose, which has proved effectual, and gradually decreasing the dose until twenty or thirty grains are reached three times a day. The drug should not be discontinued, until fifteen or eighteen months have passed without a paroxysm. It is better for the patient to take the bromides all his life, than to have fits. The addition of the bromide of iron from one half a grain to a grain, to a dose of the bromides, will do much to prevent the impoverishment of the blood



due to bromism. The following is a good formula: Take of Bromide of Potassium, six drams, Bromide of Ammonium, two drams, Bromide of Iron, six grains, water, six ounces, mix, give a tablespoonful three times a day.

It is a good rule, even after the case has been free from fits, for fifteen or eighteen months, to give a dose of from two scruples, (forty grains) to a dram, (sixty grains) every night for a couple of years.

Many of those cases of Epilepsy, which are not benefited by the bromides, are greatly benefited by strychnine, especially in subjects which have the lighter seizures, (*petit mal*) as well as the severe paroxysms (*grand mal*), and also, in those cases having the attack at night, though in the latter cases, if severe, the bromide will be required also. The dose of strychnine is one thirtieth of a grain. It had better be given in solution, though it is disagreeable to take on account of its bitterness. The following is a suitable formula: Take of Strychnine, one grain, dissolve in two ounces of Dilute Phosphoric Acid and two ounces of water. The strychnine dissolves slowly, and plenty of time should be given for solution to be effected before taking it. If the appetite is poor, thirty grains of quinine should be added to this mixture. The dose is a teaspoonful three times a day. Should it be found impossible to take this mixture, the pills of strychnine, of one thirtieth of a grain each, may be given instead. I prefer the pills of Phosphorus, one hundredth of a grain with strychnine, one sixtieth of a grain;—dose, two pills three times a day for a grown person. The phosphorus is valuable in improving the nerve nutrition.

The direct galvanic, (electric) current, is sometimes of great service, and may be used in connection with either strychnine, or the bromides or both. It can only be of service in essential or idiopathic epilepsy, (*i e* cases not dependent on structural changes, or other obvious cause). The current should include the whole brain, having the poles of the battery behind each ear; or on the forehead and nape of the neck; or one pole on the nape of the neck, and with the other follow the course of the sympathetic, and also the nerves along which the *aura*, or warning is transmitted. Each method of application may be used for one third of the time at each sitting. If beneficial, the use of the galvanic current should be continued for several months or a year.

In some cases, it is necessary to pass a seton quite deeply through the back of the neck, in addition to internal remedies. This is particularly serviceable in connection with the bromide. Both it and the bromide, seem to relieve the so called reflex irritation. Cases of Epilepsy caused by injuries to the skull, which is not relieved by the bromide of potassium, may call for surgical operation. If the patient has had syphilis or has syphilitic parentage, the Iodine of Potassium should be given either alone or in conjunction with other treatment, until all syphilitic symptoms disappear, when, if the fits cease, the further treatment will be that appropriate to that diseased condition. For this complaint, medical advice should be sought.

Belladonna and Hyoscyamus, are recommended by high authority. They are applicable to these cases, in which strychnine is most useful, viz, in epilepsy occurring at night, in the lighter fits (*petit mal*), and in pale,

delicate subjects, with cold hands and feet, a blue skin and feeble circulation. Belladonna, if used should be given as follows: one fifth of a grain of the solid extract of belladonna, or a hundred and twentieth (1-120) grain of atropinum, its active principle, each night for a month, when the dose should be doubled for the second month, tripled for the third month, and so on until as large a dose as can be borne should be reached. Trousseau speaks very highly of this remedy, and recommends its continuance for from one to four years. Hyoscyamus may be used in the same way, beginning with one half grain of the solid extract. These remedies can be had in pill; for the first month, the dose is one pill, for the second, two pills for the third, three pills, and so on until the largest possible dose is reached.

The existence of anæmia (impoverished condition of the blood), demands the use of tonics of iron and quinine. The Citrate of Iron and Quinine, two to five grains in syrup, before each meal. The Pyrophosphate of Iron will be found useful in one or two grain doses, instead of the Citrate of Iron and Quinine, if the appetite is not deficient. Cod Liver Oil is always useful in improving nutrition of the body. It should be given in doses of a tea-spoonful, gradually increased to a tablespoonful.

### HOMŒOPATHIC TREATMENT.

BELLADONNA has among its pathognetic symptoms the whole series of the phenomena which characterize an epileptic fit. It is most useful where the disease has not continued long, and has the fits rather close together, and especially if an attack of vertigo is apt to supervene: rush of blood to the head, red and bloated face, renewal of the attacks by contact, distention of the eyes with dilation of the pupils, full, hard, and hurried pulse, sudden starting from sleep with a cry and fear, obstinate, malicious temper, desire to tear everything, to bite, spectra which cause anxiety, fear, deep sleep with smiles and distortion of the features.

CUPRUM is one of the few remedies which we know positively has cured many cases. In cases where epilepsy is a primary or original disease, and not merely a symptom of some other disease, *Cuprum* is one of the first remedies to be thought of and used. It may not be any the less suitable in complicated cases. In this latter class of cases the accessory symptoms will be found the best guide in the selection of the remedy; probably in cases where the disease breaks out in the night, this medicine will be found the most beneficial, the aura commencing in the extremities and moving upward, until the speech is gone. In the treatment of epilepsy, use the higher potencies in less frequently repeated doses. We intend this last remark to apply to all the remedies in the Homœopathic treatment. And we may further say, that a careful arrangement of the symptoms, and careful selection of the remedy, by the use of the Repertory, will be decidedly the most satisfactory mode of selecting the remedy.

PLUMBUM is very nearly related to copper. Plumbum is particularly adapted to epileptic attacks with a well-defined aura, or to attacks where paralytic conditions, entire or partial loss of consciousness, remain for some time after the attack. Plumbum acts very slowly, but on the other hand, its action lasts long; it is very penetrating, so it, for this, if no other reason, is suited to cases of long duration.

CONIUM, in epilepsy arising from self-abuse.

OPIUM, in epilepsy arising from a fright, or where it supervenes during insanity.

RANA BUFO is undoubtedly a capital agent in the treatment of epilepsy, especially if the patient is the victim of onanism and will *discontinue* the practice.

BROMIDE OF POTASSIUM.—Three grain doses three times daily and gradually increased, until the dose is ten grains for an adult; dissolve in a little water.

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### ECLAMPSIA.

#### ECLAMPSIA INFANTUM. FITS OF LITTLE CHILDREN.

Eclampsia occurs most frequently at an age when epilepsy is least frequent; that is, during the first months of infancy, until the fourth year.

*Symptoms and course of the disease.* Eclampsia sets in without any premonitory symptoms, only, when it is the first symptom of the beginning of some other acute disease. As an independent disease, it is almost always preceded by preliminary symptoms. These are: ill humor, a whining mood, obstinacy, indisposition to play, sudden starting when touched ever so lightly without expecting it, sleeplessness or restless sleep, during which the lids are not entirely closed, with a peculiar twist of the mouth, gritting the teeth, change of color from the least cause, crying out without any apparent cause, sudden relinquishing of the nipple, uneasy, unequal breathing, sometimes a peculiar livid color around the mouth and eyes, and pointed appearance of the nose and chin. After these premonitory symptoms have lasted for a longer or shorter time, the actual paroxysm breaks out with the same suddenness as an epileptic attack, *only with this difference: the patient utters no cry.* Otherwise the attack has all the characteristic features of an epileptic fit. At the beginning the convulsions are for some time tonic (stiff and still), after which they become clonic (jerking), and in less frequent cases they affect only one side. The features become distorted, the eyes stare, generally squinting upwards, the body is tossed to and fro, but the extremities are not as stiff or rigid as they are during an epileptic fit. The breathing is hindered, the abdomen distended. The face is either blue-red and bloated, with considerable fullness of the blood vessels, or else it is pale and sunken, the bodily temperature is rather decreased than raised. During the height of the convulsion the consciousness and sensibility are completely extinct. Usually the paroxysm ends with a deep, moaning inspiration, after having lasted a few minutes, or even a number of hours, and the patients sink into a deep sleep, from which they awake in apparent health.

The paroxysm does not always have such a fearful degree of intensity. Eclampsia, as well as epilepsy, has a series of gradations, the attack being sometimes marked, only by partial convulsions, movements of the muscles, a staring look with some squinting and drawing up of the mouth. The consciousness remains either entirely undisturbed, or is only partially interfered with, sometimes the attacks consist in a comatose sleep, (death like sleep), which lasts for hours, with the characteristic half

closing of the eyelids, and a few convulsive twitchings, taking the place of the convulsions, even the face may retain its natural expression and color. A single fit is scarcely ever the end of the trouble. In the first place, there generally remains a disposition to relapse, and in the second place, several fits usually follow, one after the other, the intervals between the fits, being of uncertain duration and the intensity varying in degree, sometimes increasing at others decreasing in violence.

Eclampsia may terminate in recovery, partial recovery or death. Recovery may take place after any fit, sometimes quite unexpectedly, so that a child may be playing about one morning, which the day before was the victim of terrible fits. In partial recovery, some of the symptoms either remain permanently, or disappear only gradually. In such cases it is a question whether such remaining symptoms are not the result of disease of the brain, which may also have been the cause of the fits. Among such remaining symptoms, we mention paralysis of the eyes, less frequently the muscles of the back, idocy, or only a certain degree of backwardness in the development of the mental faculties, and an unusual degree of nervous irritability. Death results either during the attack, or else the death like sleep (coma), terminates in death.

The prognosis depends on many accessory circumstances, and is *always* doubtful. Age is an important consideration; the younger the child, the more likely they are to die, especially infants at the breast, but even they *frequently* recover, if the treatment is in careful hands. Where the disease is inherited, there is little probability of recovery. The more rapidly the fits follow each other, the more danger there is, especially if they continually increase in violence. Convulsions setting in at the commencement of some acute disease, are scarcely ever dangerous. If they set in during the course of the disease, they are more dangerous; they generally mean death.

FOR ALLOPATHIC TREATMENT—See Convulsions of Children, Chap. XXXIV.

#### HOMŒOPATHIC TREATMENT.

*Belladonna* is without doubt, the main remedy in eclampsia. It is particularly indicated in the case of robust fleshy children, who show unmistakable signs of congestion of the brain, with very red face, the pupils expanded, the eyes stare, or constantly vibrate, the lower jaw firmly pressed against the upper, the head drawn backward, possibly the urine may be discharged involuntarily.

*Hyoscyamus* acts very similarly to Bell. The sight of the eyes contracted, face dark red and bloated, the walls of the abdomen drawn firmly in, and the attack being caused by a fright, are indications for the use of Hyosc.

*Cuprum*. See indications under *Epilepsy*.

*Ignatia*. If the attack is sudden and violent, the fit being more free from jerking than common, if the spinal cord appears to be the seat of the disease, that is an additional indication for Ig.

*Chamomilla* is seldom useful for the fit, but may be needed to remove trouble with the bowels, before or between the fits. *The child moans and worries, and wants to be carried.*

*Cina* or *Santonine*, if the attack arises from worms. (See *Worms*).



## CATALEPSY.

## TRANCE.

We mention this disease, only because you expect us to, and can only say that it is one in which the consciousness and the voluntary motion of the muscles is suspended; though they retain the faculty of passive motion. There are *very* few well established cases on record.

It is very generally conceded, among physicians, that no treatment yet known amounts to anything. It may be necessary, in order to maintain life, to inject food into the rectum, or, by means of the stomach pump, into the stomach.

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## HYSTERIA OR HYSTERICIS.

It is not only difficult, but almost impossible, to furnish a satisfactory and sufficiently comprehensive definition of hysterics.

It is a nervous, spasmodic affection common to females, but known by some other name, when it appears, (as it rarely does), among males, usually as Hypochondria. It attacks pregnant as well as non-pregnant females, and however alarming any single attack may appear, it is, in fact, seldom attended with any danger, unless it should pass into epilepsy.

*Symptoms:* Usually the lady, from a calm or excited condition, but in which no symptoms of disease are shown, by an unwise word, and often from no apparent reason, commences crying and laughing at intervals, perhaps also venting reproaches; peal upon peal of immoderate crying and laughter, sobs, floods of tears, stolid silence, wringing of hands, tearing of hair, stiff (tonic) convulsions, clonic (jerking) spasms, and smiles, are all irregularly combined and followed by a profound calm of the constitution, and a feeling of complacency. During these symptoms the female, at the commencement, is attacked with a sense of tightness about the throat, with throbbing, or repeated attempts at swallowing. Sometimes a sensation as if a ball passed upward to the throat and lodged there is experienced, and which is called the "globus hystericus." She may roll about from side to side or she may lie perfectly still and motionless. She frequently presses her hands to her breasts or carries them to her throat, as if to remove some pressure or obstruction, the face is usually pale, though not always, and is not distorted; no froth issues from the mouth, nor are there convulsive motions of the lower jaw, but the large muscles of the back are violently contorted, so as in many instances to cause the body to describe an arch backward. The trunk of the body is twisted forward and backward, the limbs are variously agitated and the fists are firmly closed. Sometimes there is obstinate constipation and retention of urine; generally, however, the urine is pale and copious.

The paroxysm continues for a longer or shorter time, the sobbing becomes more violent, or the patient screams and sheds tears and thus the fit ends. Sometimes they will lie apparently insensible and immovable for a longer or shorter time. The attack is often preceded by



dejection of spirits, anxiety, yawning, shedding of tears, difficult breathing, nausea, palpitation of the heart, numbness of the extremities, etc.

It is not uncommon for ladies affected by this terribly annoying disease, to complain of dreadful and excruciating pains in the hips, knees, spine, etc., with great tenderness to the touch, and which is owing to the severe muscular contraction caused by the spasms, rather than by any disease of these parts. Sometimes a species of paralysis accompanies hysteria, and occasionally ladies will imagine many strange things, and even practice more or less deception, speaking in a whisper, pretending to vomit blood, meat, etc., etc.

In some women, and especially during pregnancy, with a very slight warning, they may be attacked with a severe fit of hysterical convulsions which may occur daily, every other day or at longer intervals, and which, if not removed, will induce miscarriage, which usually occurs at the time of a fit.

CAUSES: Hysteria is a disease that attacks only women, *after the beginning of menstruation*, and may be produced by various causes, as: want of sleep, excessive fatigue, disordered digestion, sudden mental shocks, as, joy, fear, grief, etc., excitement of the reproductive organs, onanism, excessive sexual intercourse, or more frequently, abstemiousness among unmarried or widow ladies. Females of a nervous, irritable temperament, are most likely to be attacked. The paroxysms occur more frequently about the monthly period than at any other time. Excessive discharges or debilitating diseases frequently give rise to attacks of hysteria which occur during convalescence, and are renewed frequently and from the slightest causes.

Hysteria may be distinguished from Epilepsy by observing, that in the former there is no frothing at the mouth, no protrusion of the tongue, and after the paroxysm is over, the patient recovers her usual state and does not fall into a sleep as in epilepsy.

It may be distinguished from apoplexy by observing that in this the patient loses consciousness and voluntary motion first, and finally all motion ceases, and the breathing is stertorous.

From puerperal convulsions, by observing that in these, the action of the muscles are violent and irregular, the head is strongly rotated to the right and left, and backward, with violent jerking convulsions of the muscles of the back, abdomen, and upper and lower extremities, spasmodic action of the muscles of the face is rapidly repeated, the lips and teeth are firmly closed, the breathing is loud and hissing, the tongue is very livid, protruded forward, and often bitten so that the blood and saliva is thrown to some distance through the compressed lips, the face becomes livid and the attack usually occurs in first labors among females with short thick necks.

#### HOMEOPATHIC TREATMENT.

The medicine which offers the closest similarity to the symptoms of the fits, when they occur, and which are most successful in restoring the patient during the paroxysms, may, in many cases, be administered in repeated doses, for the purpose of overcoming, or, at all events, of moderating the predisposition. It should, also, be borne in mind, that if this

condition be associated with other derangements, the treatment which is particularly appropriate for such derangements is also the best preventive and eradicated resource. There are, however, a few medicines which are especially and particularly applicable to the removal or modification of this constitutional tendency; these, however, we shall simply enumerate, with their chief and characterizing indications.

SEPIA is, in the great majority of cases, the medicine upon which the chief reliance can be placed, more particularly if the patient has been affected with green-sickness, whites, or with other chronic derangements, or diseases of the womb and its appendages; or, again, when she is liable to be seized with sudden attacks of debility, approaching to general but *temporary* palsy, and attended with outbreak of profuse and often clammy perspiration.

*Dose:* Four globules in a tablespoonful of water, every night at bed time, for ten days (unless change should sooner occur); then pause a fortnight, after which the course may, if necessary, be repeated as before, and so on, from time to time.

CALCAREA CARBONICA, on the other hand, is more especially appropriate for the treatment of persons of an attenuated, sickly-looking frame and pale, wan, sunken countenance, with whom the general convulsion attending the attacks is very violent, and who are subject to fainting-fits, or to an habitually impaired and capricious appetite, the menstrual discharge occurring too frequently, and in excess.

*Dose:* Four globules, as directed for *Sepia*.

NATRUM MURIATICUM is to be preferred, also, in cases in which the countenance is sickly, palid and sunken, but more particularly when there is an habitual dislike to society, and when constant gloom, sadness, or despondency is apt to affect the patient; whilst feeble powers of digestion, and prevailing chilliness, with occasional flushing of the face, and retarded menstrual discharge, further characterize the case.

*Dose:* Four globules, as directed for *Sepia*.

VERATRUM is of much service in overcoming the constitutional tendency to hysterical attacks, as well as in modifying their immediate violence, in cases in which they are attended with clenching of the jaws, or general spasm, coldness of the extremities, and clammy sweat, especially on the face and forehead.

*Dose:* Three globules, as directed for *Sepia*.

#### TREATMENT OF THE ATTACK

BELLADONNA is appropriate when the paroxysms are characterized by, and commence with, a sensation of choking, with spasmodic closing or obstruction in the throat, and every sensation as if suffocation would ensue; the face being hot, bloated, and of a dark-red hue, and there being other indications of determination of blood to the head; or, when, as the paroxysm proceeds, the eyes become prominent, wild, and staring, and the pupils much dilated; or, when, again, during the intervals between attacks, the patient habitually sleeps in a disturbed and restless manner, suddenly tossing in, or even starting from, sleep.

*Dose:* When the sensations of an approaching attack are apparent, give two globules in a teaspoonful of water, repeating the dose after

the lapse of a quarter of an hour, and again half an hour later, if the symptoms do not sooner subside; or, again, after the subsidence of the attack, or during the momentary intervals of calmness, give similar doses from time to time. After the attack, the doses should be repeated every six hours, for twenty-four hours.

IGNATIA is of great value for the treatment of hysterical paroxysms affecting patients of a mild and very sensitive disposition, or those who are subject to extreme variations of spirits, and when the attacks are apt to be somewhat suddenly announced by convulsive laughter, provoked by some slight or imperceptible cause; the face, previously pale, becoming flushed, deep-red, or even livid, and the laughter terminating in screams; or, more especially, when the attack is preceded by the sensation of a ball in the gullet, which gives rise to a feeling of suffocation, attended with spasmodic eructation; further, when convulsive movements of the extremities, with clenching of the thumbs, occur during the paroxysm; or when, again, there is alternation of flushing and pallor; or when the patient is affected with frequent fits of yawning, or with drawing of a deep breath upon recovery.

*Dose:* Two globules, as directed for *Belladonna*.

PULSATILLA is appropriate for the treatment of patients of mild and sensitive or exceedingly timid disposition, or of phlegmatic or lymphatic constitution, and when there is an habitual or very frequent derangement of menstruation, or, more particularly, with predominant derangement of the organs and functions of digestion at the period of the menstrual discharges, and when the attacks are characterized by tearfulness or fits of crying without any ostensible cause.

*Dose:* In all respects as directed for *Belladonna*.

CHAMOMILLA is sometimes of service when the attacks are preceded by flushing, with burning heat of the skin, sensation of extreme anguish and with anxious and hurried respiration, and when they occur in females of extremely excitable and peevish dispositions, and who have been habitual coffee-drinkers.

*Dose:* As directed for *Belladonna*.

GELSEMINUM should be given when the hysterical paroxysms assume the proportions of convulsions; there are: excessive irritability of body and mind; a semi-stupid condition, with languor and prostration; nervous headache, commencing in the back of the neck, and thence spreading over the head; vertigo and dimness of vision; difficult menstruation.

*Dose:* As directed for *Belladonna*.

ARUM MET. is to be preferred when the patient is habitually of a gloomy, desponding disposition, or manifests paroxysmal attacks of violent excitement, with attempts at self-destruction; and when the attacks are preceded by, and accompanied with, extreme anxiety, insupportable oppression at the chest, and palpitation of the heart.

*Dose:* As directed for *Belladonna*.

STRAMONIUM may be named as especially appropriate when the attacks are characterized by the predominance of *hiccough*, and are at-

tended with convulsive movements of the arms, and with an expression of extreme exhaustion or of vacancy, and difficult articulation; or sometimes with violent raving, sudden desire to remove, as if from the reach of some fancied danger, and with alternations of crying, or even discordant attempts to sing, and violent convulsive laughter; or when, again, the violence of the attack is liable to be reinduced or aggravated by the sight of shining or glistening objects.

*Dose:* As directed for *Belladonna*.

NUX VOMICA is to be preferred when the patient is habitually of an irritable disposition, or of nervous or bilious temperament, and of costive habit,—or generally, moreover, of a meagre frame and pointed features: the attacks being preceded or accompanied with twitchings of the limbs or of particular muscles, and when a vexation or disappointment has been the exciting cause of the attack. Also when stimulants of various kinds have been too freely employed from time to time.

*Dose:* In every particular as for *Belladonna*.

VERATRUM is generally to be recommended when the attacks are characterized by clenching of the jaws, or general spasmodic affection of the entire frame, coldness of the extremities, and clammy perspiration, especially on the face and forehead, and when a considerable quantity of pale urine is generally voided before or after the attack.

*Dose:* As directed for *Belladonna*.

CONIUM should be administered when there is much vertigo, particularly on lying down; she cannot turn in bed, without exciting great dizziness. The breasts swell, and become painful and hard, as the menstrual period approaches, at which time the hysterical symptoms are usually developed. Choking sensation in throat, as though a ball were ascending from the stomach.

*Dose:* In every particular as directed for *Belladonna*.

MOSCHUS. Violent, long-continued scolding, until she falls down in an hysterical paroxysm. Great anguish; she feels as if she must die, and insists that she will die. Feeling of constriction or tightness on the chest during the paroxysm.

*Dose:* As directed for *Belladonna*.

CAULOPHYLUM will prove of value in some cases, when the hysteria can be traced to disordered condition of the menstrual flow, or to some disease of the womb.

*Dose:* As directed for *Belladonna*.

CACTUS GRANDIFLORUS should be given when there is great sadness, taciturnity, and irresistible inclination to weep; love of solitude, and fear of death; menstruation is excessively painful, and there is great prostration at the menstrual period. It is particularly suitable for cases in which there is a disordered condition of the heart.

*Dose:* As directed for *Belladonna*.

#### ACCESSORY MEASURES.

Above all things, it is necessary that any portion of the clothing which may fit tightly should be loosened as an attack ensues, or threatens to



ensue; all strings and fastenings should be undone, and the stays should be unlaced. Whatever may tend to impede the circulation should be removed, and the patient should be stretched out in a recumbent position, (the floor being the safest and best place), beyond the reach of any article which she might strike against in the convulsive movements. A free current of air should then be admitted, and the face of the patient should be sprinkled with cold water. Friction of the wrists, ankles, and palms of the hands, is often also of service.

#### GENERAL REMARKS.

In order to overcome the constitutional tendency to hysteria, a long and judicious course of treatment is always required in inveterate cases.

**DIET AND REGIMEN.** Persons who are subject to hysterical attacks should avoid tight lacing, or any articles of clothing which fit too closely and firmly round the body. Elastic jackets are much to be preferred to stays. They should also take regular exercise in the open air, without fatiguing themselves; avoid all depressing and exciting emotions; live regularly; keep early hours; abstain from rich, seasoned, or stimulating food or drinks, and partake only of plain but nourishing food. To these regulations may be added such others as have been enumerated under the head of "Green-Sickness," "Suppressed Menstruation," "Excessive Menstruation," "Difficult or Painful Menstruation," "Whites;" and also the general rules prescribed in the article on "Eradicative Treatment."

#### ALLOPATHIC TREATMENT.

**HYSTERIA.**—The name given to this disease was because of a supposed connection between it and a diseased uterus (womb.) In a certain proportion of cases there can be no doubt that this relation exists. When the uterus is affected, with a decided alteration in shape, general treatment, while not without benefit, will quite frequently fail in removing the disease. If the patient is young and unmarried, without any irregularity in the catamenial flow, without pain in the back, or without pains or undue frequency in micturition, such cause may be excluded, and the patient placed at once on general treatment alone. If the patient is married but barren, there is a probable causative relation between the womb and the hysteria, or, in any case, if there is marked irregularity of the catamenia (monthly sickness), backache, and frequent passage of urine, in only small quantities, there is doubtless a displacement of the uterus, which should be restored by a competent physician and maintained in a state of rest.

Regarding general treatment, one of the principal objects is to invigorate the body by good, nutritious food, exercise in the open air just short of weariness, and regular habits regarding sleep. The mind should be strengthened by healthful occupation. Everything which excites the feelings, emotions, passions, or imagination, should be avoided. The patient should be urged to arouse the will against giving way to the paroxysms. The discreditable opinion commonly held of the disease may be urged as a motive for the patient to resist, to use the power of her own will, in warding off the affection.

This part of treatment is moral and its success rests on the tact of the attendant, but requires discretion and delicacy. Many times is the phy-



sician's patience sorely tried by patients prolonging the malady by their own desire, in order to excite sympathy.

If the patient is in reduced health, the Elixir of Quinine, Iron and Strychnine, in doses of a teaspoonful before each meal, will prove beneficial. Or the Elixir of Bark, Iron and Strychnine, may be given in the same doses, or doses of a dessertspoonful (two teaspoonsful).

If the patient is young, and in vigorous health, the Bromide of Potassium, in doses of twenty or thirty grains, three or four times a day, will often prove most beneficial, by allaying all forms of nervous excitement. Mono-Bromated Camphor is, also, beneficial, under the same conditions. It is best given in pills. The dose is four or five grains, three or four hours apart.

The distressing symptoms in hysteria demand attention and relief. In a hysterical convulsion, if it were not that the patient may inflict injury upon herself, as they would soon end of themselves, it would be well generally to make no attempt to interfere, but let the paroxysm exhaust itself. Pouring cold water upon the head, from a little height, will generally bring the "hysterical fit" to an end. The insensibility (coma) of hysteria will generally yield to the same means.

Some of the remedies which many times have a favorable effect upon the hysterical condition, are: Assafoetida and Valerian, Mixture or milk of Assafoetida (two drams of Assafoetida dissolved in a pint of water) may be given in doses of one or two tablespoonsful just before an expected attack. It may be repeated two or three times in the twenty-four hours. The Assafoetida may be given in pill.

Valerian, in fluid extract, dose, a teaspoonful; tincture, dose, two teaspoonsful; an infusion (tea) (made with a half ounce of the Valerian root to a pint of water), dose, a wineglassful may be given to answer the same purpose as Assafoetida.

The headache of hysteria is best relieved by Hyoscyamus and Camphor, or the Bromide. The Tincture of Hyoscyamus and Spirits of Camphor may be given in doses of a teaspoonful.

In the absence of other means, the free use of *hop tea* will afford a good degree of tranquility to the nervousness of the patient.

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## CHOREA.

### ST. VITUS DANCE. EPILEPSIA SALTATORIA.

Chorea is a disease of the later years of childhood. It is seldom seen before the sixth year of age, and only occasionally after the fifteenth.

**CAUSES:** *Onanism, worms, fright, anger*, second period of dentition (teething), and a continued effort to imitate some one afflicted with the disease.

**SYMPTOMS:** At first, the patients show a certain uneasiness in their movements, and an unusual hurriedness, low spirits, ill temper. (The last two symptoms are often made much worse by the unkind rebukes the child receives, for what appears like hurried carelessness in handling things).

Gradually, or, in some cases, very soon, the involuntary movements begin, either confined to single parts, or affecting the whole muscular system; the upper extremities are usually more affected than the lower ones. The face shows every possible contortion; even the eye balls are rolled about in every direction; the arms and hands are, at times, flexed (drawn up), at others, extended. The grip is no longer firm; the patients cannot eat alone, or if they do, have to bring their food to the mouth by a very circuitous route; the walk becomes unsteady, because the legs can no longer be put down with sufficient steadiness, and even the ability to keep them stiff enough to support the body firmly, is wanting. A striking feature of the disease is, that the more the patient tries to keep the part still, the more violent the involuntary motions become. It is peculiar to this disease, that even those excessive muscular movements do not fatigue the patient.

After a gradual increase of the symptoms, the disease reaches its height, where it remains stationary for a time, lasting a few weeks, or even several months, and sometimes terminating in recovery, either quite suddenly, or only gradually. The cases where the convulsive movements become habitual, are very rare. Death is a very rare termination of the disease. So that the *prognosis* is favorable.

#### ALLOPATHIC TREATMENT.

CHOREA—St. Vitus' or St. Gay's Dance. This disease occurs, in a large proportion of cases, in persons whose vital forces are, more or less, reduced, and in a state of anæmia (impoverished blood). The diet should be plain, and unirritating, but nourishing. Fresh air, and out of door exercise, are to be insisted on. In proportion to the weakness, and anæmia, should tonic treatment be resorted to. Iron should be given, to restore the blood to its healthy state. I would use the Pyrophosphate of Iron, in doses of a grain, three times a day. Take a dram of Pyrophosphate of Iron, dissolve in four ounces of Simple Syrup, and give a teaspoon half full, to a young child, and a teaspoonful to a nearly grown child, three times a day.

Sweet cream, or Cod Liver Oil, will be useful in restoring health and strength; of course, they are not to be given if the patient is full blooded, or over fat; but this is not likely.

The bowels should be kept regular, and a daily bath should be given. If agreeable to the patient, and the reaction is good, a cool bath is preferable, but if not, the bath should be warm.

In some cases, the involuntary movements are so violent that the patient should remain in bed.

The two remedies which certainly exert a curative influence over the disease, are, Arsenic and Strychnine.

Arsenic is of undoubted value. It is conveniently given in the form of Fowler's Solution, in doses of five drops, three times a day, after eating. It can be given in water, or added to each dose of the Syrup of Iron, recommended above. It should be continued until swelling of the eyelids is produced.

In obstinate cases, of general or local Chorea, this remedy has been

found exceedingly useful, administered by hypodermic injection, in doses gradually increased to fourteen drops, diluted by an equal quantity of water.

The chief reliance of many physicians is upon Strychnine, but the most effectual manner of administering is such, that it is unsuited to domestic practice. If the case is obstinate, and a physician cannot be obtained, I would recommend the following: Take one grain of *Sulphate* of Strychnine, water four ounces; a solution of Hypophosphite of Soda, in simple syrup, two and a half drams of the Hypophosphite of Soda dissolved in four ounces of simple syrup. Dose: a teaspoonful three times a day, given with the Syrup of Pyrophosphate of Iron. After solution is effected, give a teaspoonful three times a day to a child ten years old. After a few days it may be given four times a day. If rigidity of muscles is produced the dose should then be diminished.

In those severe cases in which the excessive choried movements prevent the proper amount of sleep, moderate doses of Hydrate of Chloral should be given to secure rest. Take of Hydrate of Chloral and Bromide of Potassium each two drams, simple syrup, two ounces. Mix. Dose: a dessertspoonful once or twice a day, to procure rest.

#### HOMEOPATHIC TREATMENT.

In view of the well-recognized fact, that most cases of Chorea get well themselves, although slowly, we would recommend the very limited use of medicine.

The Homœopathic remedies we will only mention the names of; they can be compared by the use of the *Repertory*: *Cuprum*, *Stramonium*, *Belladonna*, *Hyoscyamus*, *Ignatia*, *Zincum*, *Cina*, *Gelsemium*. If caused by onanism, *Phosphoric Acid*.

## Part Third.

### DISEASES OF THE HEAD.

## CHAPTER VII.

### HEADACHE.

Headache is one of the most common symptoms of many forms of disease. Hence we might *name* a great many forms of headache arising from a variety of causes, without, however, helping the treatment in the least by so doing.

The headache will disappear as soon as the affection upon which it depends is cured. It is not always easy to find out the causes of headache; it is sometimes very violent, when the general disease seems very slight, and seems on that account, to be more or less an independent condition of distress; but all attempts to point out remedies here for *all* such cases, would be more than our space will allow. If the headache is simply an accompaniment of some other complaint, we must refer the reader to that complaint and the "Repertory" for treatment, and here only devote our attention to some particular forms of headache, which appear to be almost disconnected with other affections.

1. HEMICRANIA OR MEGRIM. A headache which usually affects one side of the head and occur paroxysmally at more or less regular intervals. This headache is a pure neuralgia, and while it does sometimes occur in company with other diseases, it occurs more frequently without such associations.

*The Causes.* Where it occurs as a complication of other diseases, it may depend upon liver-complaint, derangement of the stomach or heart, but more frequently upon an unhealthy condition of the sexual organs. As an independent disease, it is only met with in the constitution and temperament which we term "nervous." Hence, it is more frequent among females and occasionally among children.

*The Symptoms.* In general, the symptoms of this form of headache are very constant and uniform, varying only in less important points. In most cases, without any precursory symptoms, much less frequently after a previous feeling of fatigue, the patients awake in the morning with a violent and constantly increasing headache. The pain is throbbing or tearing or burning, or simply an ache, and is generally confined to a sharply circumscribed locality on *one* side of the head, usually the left. External pressure affords relief. Every mental and physical *effort* is painful, while mental pleasure and attractive occupation afford some relief. As the pain increases the eyes become sensitive to the light, and there is a

copious flow of tears. When the pain is at its height, the patient vomits a watery phlegm after having experienced nausea for some time previous. After the vomiting the patients feel better, and want to sleep, and after a sound sleep they generally wake quite well, only a little weary. Such paroxysms sometimes recur again in a few days, sometimes not till months have elapsed; in the case of females, they are apt to come on about the monthly period. The general condition of the system is not always affected by the attacks; in the intervals between the attacks the patients may have the appearance of enjoying good health. Very rarely the pain lasts beyond twelve hours; if it lasts longer, it may continue thirty-six hours; (See *Treatment* at the end of this article).

*Neuralgic Headache.* What this form of headache has in common with Megrin is, that it likewise occurs periodically, most commonly affecting only one side of the head, and likewise tending in some cases to excite vomiting. But unlike megrim, this headache never ends with one paroxysm alone, but after the headache has once begun, the paroxysm generally returns at the same hour for several days in succession, sometimes with as much regularity as intermittent fever.

The remaining varieties of headache—Catarrhal, Congestive, Gastric, Rheumatic, Sick and Nervous—will be kept in mind in the treatment of this subject without further reference here to each of their peculiarities, and patients will find the treatment very satisfactory.

#### ALLOPATHIC TREATMENT.

**HEADACHE.**—Recurring headache is one of the most difficult troubles to treat successfully, as far as permanent cure is concerned, yet many cases are much benefited by treatment. Hereditary predisposition, which is found in many cases, is beyond the reach of art, as far as removal is concerned, but their operation may be greatly lessened by prudence and proper treatment.

The disease, when not a symptom of the numerous affections which it accompanies, as active congestion of the brain, inflammation of the membranes of the brain, inflammation of the brain, the essential fevers, etc. is, especially, neuralgic, and similar measures are called for in its treatment. When the pain is located in the face, or forehead, in the scalp, or back of the head and neck, and two or three tender points are found by pressing on the skin with the finger, the disease is a neuralgia of those parts, and should be treated as directed in the article on neuralgia.

The treatment will embrace measures to be employed at the time of the attack, when immediate relief is urgently demanded and during the intervals, when the design will be to guard against a recurrence of the attacks, and moderate their severity. If the patient is a hearty, robust person, with an abundance of blood, and the headache dependent upon fullness of blood, and such symptoms of congestion occur, as a flushed face, throbbing of the head and ears, the congestion should be relieved. Probably a saline purgative, as a tablespoonful of Epsom Salts (sulphate of magnesia), in water, slightly acidulated with lemon juice, or coffee, will prove effective against both the congestion and the headache. Such means as the application of cold to the head, by means of cold, wet clothes, or



pounded ice in a sack or bladder, and hot foot-baths of simple warm water, or with the addition of mustard or red pepper, may be employed. In such persons the diet should be somewhat reduced, more exercise taken, and if constipation exists, it should be overcome by a daily dose of a teaspoonful of Epsom or Rochelle Salts.

Many cases occur where congestion is not so violent, following some error of diet, in which mild purgatives are useful; two or three *Compound Cathartic Pills*, U. S. P., or the *Improved Cathartic Pills*, will answer a good purpose, though many others may be given. The salines act more quickly.

If patients are not unpleasantly affected by opium, an attack may frequently be warded off, shortened or lessened, by a full dose of opium in some of its forms, as one grain of powdered Opium, or one-sixth to one-third of a grain of Sulphate or Acetate Morphine, or a *grain of Codia*.

Carbonate of Ammonia, in doses of from five to ten grains, is sometimes successful in affording relief; also the Muriate of Ammonia (Sal. Ammoniac), in doses of ten grains.

The congestive form of *sick headache* is generally dispelled by one or more full doses, twenty to forty grains, of the Bromide of Potassium. The variety in which it acts, almost as a specific, is characterized by a flushed face, throbbing temples and intolerance of light. Ergot is also a valuable remedy in this variety of headache, and should be given in doses of a dram (teaspoonful) of the Fluid Extract. Some physicians extend its use to all forms of headache.

The opposite form of sick-headache, manifested by paleness of the face, dizziness, and ringing of the ears, is quite certainly relieved by Belladonna. The distress may be increased at first, but great relief follows afterward. The following is a useful formula: *Take of Atropium* (the active principle of Belladonna) *one-fourth of a grain, Chinoidine twenty grains*. Mix and make into twenty pills. Take one pill two or three times a day. Five grains of Extract of Belladonna may be used instead of the Atropium. Relief is often obtained in this form of headache by the use of Elixir of Guaiacum, in doses of a tablespoonful frequently repeated—from thirty minutes to an hour apart.

Some cases of nervous headache are quickly relieved by a teaspoon half full of Hoffman's Anodyne (Compound Spirits of Ether.)

I have found cases in which the following relieved the pain with greater certainty than anything else used in their treatment: *Take of Chloral Hydrate one dram, Bromide of Potassium one dram, Simple Syrup two ounces*. Mix. Dose, a dessertspoonful, and repeat in two or three hours, if the pain is not relieved.

The physician often finds it necessary to let the patient inhale a little Chloroform. Evaporating lotions (washes), as Alcohol, Spirits, Cologne, Vinegar, or Ether, often afford relief. Sometimes a towel, or other large cloth, wrung out of hot water and applied to the head, gives greater relief than cold applications. Strong coffee or tea may give great relief in some cases, though their constant use is often a cause of aggravating the malady.

During the interval between the paroxysms, attention should be given to the general health, and to correct, as far as possible, any disorder

which may be discovered. Indigestion and constipation are to be guarded against. The laws of health should be closely observed. Everything which is noticed to excite or increase the severity of the attacks, must be avoided. Sleep should be sufficiently long, and to this end the patient should habitually retire early. If the appetite is poor, and the patient weak and pale, or if he feels weary upon rising in the morning, he should have an Iron tonic, and plain but nourishing food. The Pyrophosphate of Iron one dram, dissolved in four ounces of water, or syrup, can be given in doses of a teaspoonful after each meal. Or the Citrate of Iron and Quinine can be given in the same way.

In addition to Iron, I would recommend the pills of one-tenth grain of Phosphide of Zinc, and one-fourth grain of Extract of Nux Vomica, known as Hammond's formula, of which one or two pills may be given three times a day; or the pills of Phosphorus, one-fiftieth of a grain, and Extract of Nux Vomica one-fourth of a grain, may be given in the same manner.

Arsenic has been found useful, given between the attacks, and should be tried if the other means, after a faithful trial, do not benefit. It can be given in the form of Fowler's Solution, in doses of five drops in water, after eating. If swelling or watering of the eyes occurs, its use should be suspended until this symptom disappears, and then resumed again.

Small doses of Quinine, two or three grains three times a day, may prove effective in guarding against a recurrence of the attack. It can be taken in powder or pill.

Stimulants of all kinds are generally harmful, including beer and wine, and can be generally given up with advantage. Excesses of all kinds should be avoided.

### HOMCEOPATHIC TREATMENT.

**ARSENICUM** for intense frontal headache with vertigo, tearing in the head, with vomiting, when raising the head. Headache after meals, relieved by applying cold water, or by walking in the fresh air; sensation in the brain, as if torn to pieces, with unquenchable thirst; all *periodic headaches*; sometimes, when the headache is intense, a dose or two of *Ars.* gives as much ease as a dose of Opium ever does.

**BELLADONNA** for *headache from the heat of the sun*. Nervous headache frequently on one side of the head, especially the right side, coming on from 4 P. M., to 8 A. M., aggravated by the heat of the bed, and by lying down; better when sitting up, feeling in the brain like the swashing of water, cold sensation in the brain in the middle of the forehead; pressive frontal headache, so severe when walking that the eyes are sometimes drawn shut, frequently obliged to stand still, when walking, from the violence of the pain in the forehead; at every step it seems as if the brain rose and fell in the forehead, relieved by strong pressure on the forehead; violent throbbing in the brain, from behind forward, and towards both sides; finally painful shootings, stabbing as if with a knife from temple to temple; boring, tearing, cutting, shooting pains in various parts of the head, worse on right side and in forehead, less in back of the head; headache is accompanied by dizziness, stupefaction, red and

bloated face, red eyes; excessive sensitiveness to noise, light, shock, jar, or slight contact; ill humor; *pains come on suddenly*, last indefinitely, but cease suddenly; headache from catching cold in the head, as from having the hair cut.

*Dose:* Of a solution of eight pills in four tablespoonsful of water, give a teaspoonful every 15 minutes to two hours, according as the severity of the case demands.

**NUX VOMICA.** *Congestive headache*, and headache from derangement of the stomach (GASTRIC), with nausea and vomiting, worse by coughing and stooping; pain as from a nail driven into the brain, or stitching pain with nausea and sour vomiting, stitches and pressure in one side of the head, worse in the morning, driving the patient out of his senses; excessive sensitiveness of the brain to motion and walking; heaviness of the head, especially when moving the eyes or thinking; *with sensation as if the skull would split*; whizzing in the head, with vertigo, or with shocks when walking; *headache every morning on waking, after eating, and in the fresh air*, when stooping or during motion, even when merely moving the eyes; the pains come again after drinking coffee; aversion to coffee, pale, worn-out look; *constipation* with tendency of blood to the head, irritable, vehement disposition, or lively, sanguine tempers; persons who lead a sedentary life, or who drink.

*Dose:* As for Belladonna.

**CALCAREA CARB.** for icy coldness in and on the head, also one-sided headache, with *pale*, puffed face, with empty belchings (eructations) and nausea, vertigo; worse from mental exertion, stooping, or walking in the open air; better by closing the eyes or lying down; headache begins in the back part and spreads to the top of the head, so severe one thinks their head will burst and they will go crazy; throbbing headache in middle of the brain every morning, lasts all day; headache from *over-lifting*; menstrual headache; worse going up stairs, talking or walking, or riding in the hot sun, or from taking cold; *better from* tight bandaging, vomiting of mucus and bile, and pressure, with cold hands or something cold.

*Dose:* As for Belladonna.

**IGNATIA** is especially appropriate for one-sided headaches proceeding from irritation of the spinal nerves, or may be required in cases where Pulsatilla appeared to be indicated, but failed to relieve. It is also an excellent remedy and should be preferably selected in cases in which the pain is confined to a small space, and causes a sensation as if a nail *were being driven from within outward*; also when the pain is of a pressive aching, or of a shooting description proceeding from within outward and chiefly confined to the forehead and root of the nose; and when there are nausea and dimness of sight, and sensibility of the eyes to light; *pale ness of the face*, (Nux is red) and temporary alleviation from change of position; aggravation from noise, strong odors, and drinking coffee. Ignatia is especially applicable to nervous females of a mild and sensitive disposition, or to those in whom the attacks are prone to be excited by depressing emotions or return at the menstrual period.

*Dose:* As for Belladonna.

SEPIA is one of the most valuable remedies in the treatment of severe and inveterate *sick headache* or *megrim*. It is more particularly required in periodical headache, aggravated by mental emotions, in nervous females; the pain is either of a lancinating description, or it is a pressive aching, shooting, or a tearing, piercing or jerking pain, and affects the whole of the head, or it is only seated under the eye or occupies one half of the head or forehead; in the latter case the pain is experienced chiefly in the morning, and is frequently attended with extreme sensibility of the eyes to the light. Sepia is also very efficacious in cases of obstinate megrim, with violent piercing or rending pain, intermingled with lancinations so excruciating that the patient is afraid to move, and can obtain only a very little relief by keeping perfectly still with the eyes closed; at other times the pain is so severe as to cause the patient to scream out, and is accompanied with heat in the head, or faintness and giddiness, followed by nausea and vomiting. The source of the *nervous* headaches which call for the employment of *Sepia*, is to be found in derangement of the digestive organs or in some derangement of the womb, in the case of females. The headache is consequently a secondary and not a primary affection. We accordingly find that it is of the greatest efficacy in cases attended with green sickness, or with whites, in the intervals between periods, when a sensation of heat and fullness in the lower part of the belly, and also a peculiar offensive-smelling sweat, particularly in the armpits and on the feet prevail; lastly, pale, dirty or yellowish complexion with a number of yellowish brown spots across the nose, a little resembling a saddle; shrunken features, or a countenance expressive of suffering; spare habit of body; constipation.

*Dose:* As for *Belladonna*.

SANGUINARIA.—This is one of the choice remedies for the *sick headache* to which Americans are subject; the attacks occur paroxysmally; the pains begin in the morning, increase during the day, and last till evening; the head seems to feel as if it would burst, or, as if the eyes would be pressed out, or the pains are digging, attended by sudden, piercing, throbbing lancinations through the whole brain, involving the forehead and top of the head more particularly, and being most severe on the right side, followed by chills, nausea, and vomiting of food and bile, forcing the patient to lie down and preserve the most perfect quiet, as every motion aggravates the suffering, which is only relieved by sleep; the head is congested and the veins on the forehead are distended like whip cords.

*Dose:* As for *Belladonna*.

PULSATILLA is a remedy of great value in the treatment of megrim characterized by rending or shooting pains, with heaviness of the head, giddiness, dimness of the sight, sensibility to light, or buzzing or singing in the ears and earache; nausea, paleness of the face, lowness of spirits, headache with pain in the back of the neck; aggravation of the headache, with chilliness, towards evening, during repose, or particularly when sitting; amelioration in the open air; disposition mild; temperament phlegmatic. In females with *retarded* periodical returns.

*Dose:* As for *Belladonna*.



BRVONIA for rheumatic headache, or headache with aching, piercing, or digging-tearing pain at a small fixed spot, or piercing, aching pain in the forehead daily after a meal, or coming on in the morning, disappearing in the afternoon and returning again in the evening with great violence, when it is attended with a sensation as if the head were pressed together, particularly at the temple; burning, tearing pains over the entire head, or shootings in one side of the head. The pains are increased by motion and are attended with ill-humor and disposition to chilliness or shivering; they are sometimes relieved or terminated by a fit of vomiting.

*Dose:* As for *Belladonna*.

SULPHUR is indicated in chronic headache, following the suppression or driving in of some eruption or disease of the skin; headaches occurring every day or every eight days, worse in the morning, or during the night, and attended with heaviness of the head, aching, or pressive pains in the forehead above the eyes, (causing the patient to knit the brows or keep the eyes closed) or over the entire head; incapability of mental exertion from the pains in the head; pains as if the head would split, or rending, shooting, dragging, jerking pains on one side of the head; aggravation of the headache from meditation, the open air, or movement; extreme tenderness of the scalp cannot bear to touch or comb the hair; falling off of the hair.

If none of these remedies appear to be appropriate, study with the aid of the "Repertory," the following additional remedies: *China*, *Veratrum*, *Gelsemium*, *Colocynth*, *Cimicifuga*. In general cases, headaches which do not simply occur as the result of casual or accidental derangements involving irregularities of digestion, the diet should be plain, but (in the absence of fever) nutritious, and the meals should be regular. Regularity of the general habits, and early resting and rising with exercise in the open air (short of fatigue) are valuable aids in promoting and assisting a permanent cure. Everything which is known to provoke or aggravate an attack should be carefully avoided. Nineteen out of twenty cases can be cured, if this treatment is perseveringly adhered to.

HOME REMEDIES.—Soda one-fourth teaspoonful, pulverized charcoal one-fourth teaspoonful, paregoric ten drops, mix, to be taken as one dose and repeated in one-half hour, if need be. This is splendid for sick-headache, and should be given as soon as the indistinctness of vision comes on.

*Blood root*, or *Sanguinaria* (Red Perceon), which is so common in our country, is a most sovereign remedy for American sick-headaches.

Constant headaches may frequently be cured by snuffing certain articles, such as Camphor, the juice of Blood Beets, or Ground Ivy, or freshly-grated Horse Radish roots.

A *towel* or *night-cap*, wrung out of cold water and applied to the head, on retiring at night, is good for a headache which returns every morning.

Applications of water, sometimes hot, at other times cold, will give relief in many cases.



## NEURALGIA.

## NERVE-PAIN, FACE-ACHE, FACE-AGUE, AND NEURALGIA IN GENERAL.

**SYMPTOMS.** Neuralgia is one of the most painful diseases, or rather symptoms of disease, to which the human family is subject. It commonly occurs in the nerves of the face, although it is met with in different parts of the head, in the breast, side, hip-joints, and other parts of the body and limbs. Its attacks are usually sudden, and the paroxysm of pain varies in its duration.

The pain is agonizing, lancinating, and shooting along the nerves like a shock of electricity, frequent feeling as if red-hot wires were thrust into the parts, and after the pain passes away, a numbness remains for some time.

Sometimes, instead of attacking suddenly, it commences with a slight heat or sense of itching or numbness which augments in severity more or less rapidly. The pain occurs from time to time, at longer or shorter intervals, and is often produced by the most trifling causes, as a draught of air, a slight jar or noise, or even talking.

The prognosis is favorable, as far as life is concerned, but the fearful, and frequently returning pain exhausts the body and wears on the mind to such an extent, that the patient is often driven to insanity, melancholy apoplexy, and even suicide.

**CAUSES.** Exposure to miasmatic influences, injuries to the nerves by accident, heat or cold, derangements of the digestion, the growing of the bone, through which the nerve passes, so as to close the very small opening through it; tumors growing in such a position as to make pressure on the nerve, and other causes which are to this day, not well understood by physicians.

Neuralgia may be distinguished from *rheumatism* by the intensity of the pain, its short continuance and rapid return, and its liability to return on the slightest touch: in *acute rheumatism* there is fever, redness, heat in the affected part and some swelling, all of which are absent in neuralgia; in *chronic rheumatism* the pain is continuous, less severe and often worse at night. From *toothache* by the short continuance of the paroxysms, the rapidity with which it comes and goes, and the frequent convulsive twitchings of neuralgia.

## ALLOPATHIC TREATMENT.

The treatment of Neuralgia has reference in the first place, to the removal of the cause, or morbid condition, upon which the neuralgia is ascertained to depend. These may be malaria (or miasmatic poisoning), poisoning by lead, an impoverished condition of the blood (anæmia), syphilis, pressure by morbid growths upon a nerve, etc. In all these instances, while it is common to consider the neuralgia a disease, it is really but a symptom and the cause behind the disease. A rheumatic or gouty condition of the system frequently contributes to the production of the neuralgia, and treatment appropriate to these conditions is called for.

We nearly always find the health poor; the bowels should be kept regular by means of laxatives, but physic should be avoided. Aloes and

Pepsine answer very well. Take of *Aloes eight grains, Pepsine thirty-two grains, Syrup of Gum Arabic a sufficient quantity.* Make a mass and divide into sixteen pills. Dose: one or two each day at dinner.

A generous nourishing diet should be given with plenty of milk and cream, raw eggs beaten with sugar and water, or milk and animal food twice a day. Cod Liver Oil will be found beneficial in building up the health. The clothing should be warm and flannel worn next to the skin. Often in intercostal neuralgia (in the nerves between the ribs) a chamois skin shirt will be exceedingly useful and chamois skin drawers will be equally useful in sciatica (neuralgia of the great nerve of the thigh.)

Iron is the great restorer of the health in these cases, by enriching the blood. The Citrate of Iron and Quinine, dissolved in Orange Flower Water, or syrup, can be given in five grain doses three or four times a day, or the Tincture of the Chloride of Iron can be given in thirty-drop doses, largely diluted in sweetened water, after each meal. Other preparations of iron may be given with equally good results. When the benefit expected does not follow the use of it, iron should be given with Manganese. An eligible formula is: *Take of Sulphate of Quinine, Dried Sulphate of Iron, Dried Sulphate of Manganese, each, thirty grains.* Mix, and let them be made into thirty pills. One or two pills to be taken three times a day.

When the neuralgia is periodical, i. e. the pain recurs at regular intervals, QUININE is a sovereign remedy, but its success is often remarkable when given in cases which are not periodical. It should be given in large doses, fifteen to thirty grains a day, for a week or more. This remedy is elevated to the first rank as an internal remedy for neuralgia. *Arsenious Acid* (Arsenic) will rank next in value to Quinine, and will be ordered by the physician in cases in which Quinine is not tolerated, though it will not be likely to succeed, if Quinine has failed. *Fowler's Solution* is the most convenient form and should be given in doses of five drops in water, after each meal. But if the hygienic and tonic plan of treatment fails, a physician had better be consulted before resorting any farther to internal remedies. In rebellious cases the other remedies usually given are Strychnine, the preparations of Zinc, Carbonate of Iron in large doses, Phosphorus, Iodide of Potassium, Oil of Turpentine and Iodide of Potassium. The latter is indicated when the neuralgia depends upon a rheumatic condition, and also with mercury when the neuralgia depends upon syphilis.

The relief of pain occupies a large place in the treatment. During the severe paroxysm, large doses of Opium are generally required. Morphine in doses of one-fourth to one-half a grain can be given every hour, until relief is obtained, *then stop giving it.* The most effective method of giving Opium is by injection beneath the skin, (hypodermic) over the seat of pain, at the hands of a physician. The relief given is complete, and cures are effected in numerous instances, especially, in sciatica. This element in the treatment, should be guarded most carefully to avoid the morphia-habit. If the pain is not severe, relief may be had from Belladonna, Hyoseyamus, Conium, Stramonium or Aconite, etc. Probably as good an internal anodyne as any is Brown-Sequard's Neural-

gia Pills, in which several of the pain-relieving substances are combined ; the dose is one pill, from two to four hours apart. When the patient cannot take a pill, a watery solution may be made, or a pill may be crushed and taken as a powder. In the absence of these pills, the Tincture of Belladonna may be given in doses of ten to twenty drops ; or the Tincture of Hyoscyamus, in doses of a teaspoonful to a tablespoonful, at the same intervals. The object to attain is relief from pain.

Much relief may be obtained by local applications: The best of these are liniments of Aconite, Chloroform, or Opium. A piece of flannel should be saturated with the liniment, laid on the painful part and covered with oiled silk. A good liniment, applied in this way, is this: Take of Tincture of Aconite, of Chloroform of each half an ounce, of Soap Liniment one ounce. Mix.

Of the forms of counter-irritation, resorted to in neuralgia, the one most generally useful is the "flying blister." Small fly plasters about half an inch in diameter, are placed over the painful points, for two hours. The blistered points are to be dressed with simple ointment or tallow and allowed to heal as soon as possible. The blisters are to be repeated in a few days, if the neuralgia continues. *Mustard plasters* and dry cupping can also be resorted to. Severer counter-irritation will be resorted to by the physician in obstinate cases.

In essential neuralgia, *i. e.*, not dependent on an ascertained cause, there is no more useful agent than electricity in procuring relief from pain, and sometimes a cure results. Neuralgia of the face, neck and shoulder, and of the hip and thigh (*sciatica*), are the forms of neuralgia most likely to be benefitted by electricity. The positive pole of the galvanic battery should be placed at the point of emergence of the affected nerve, and the negative over the principal divisions of the expansion. From five to ten minutes should be occupied at each sitting. In old cases of *sciatica*, a needle, isolated nearly to its point, should be passed down into the flesh, near the nerve, and attached to the positive pole, while the negative sponge, electrode, is passed over the course of the nerve. Galvanism frequently gives the best results in neuralgia of the uterus and ovaries.

A permanent cure will generally depend upon a correct appreciation and management of the (diseased) constitutional condition upon which the neuralgia is dependent, or with which it is associated, with hygienic and tonic measures to strengthen the tone of the system and general health. These were alluded to in the beginning of our description of the treatment of this malady.

#### HOMŒOPATHIC TREATMENT.

BELLADONNA is indicated by darting pains in the cheek-bones, nose, jaws, or in the bones adjoining the ears ; or cutting and tensive pains, with stiffness at the nape of the neck, and clenching of the jaws, twitching of the eyelid, or violent, shooting, tearing, and dragging pains in the ball of the eye ; jerking pains in the facial muscles and mouth ; heat and redness of the face. The pain is, generally, preceded by itching and creeping in the affected side of the face, and at times becomes so severe as

to be almost insupportable. The paroxysms are prone to be excited by rubbing the usual seat of the sufferings.

*Dose:* Three globules in a teaspoonful of water, or dry on the tongue, repeated at intervals of four hours, for the first two days (should the pains continue, or recur *without change* of character during this period), and, subsequently, at intervals of twelve hours, for two days (if yet required); after which (if necessary and still indicated) the course may be repeated as before, and so on, until decided and permanent amelioration or change.

PLATINA is appropriate when the subjoined symptoms are predominant:—Feeling of *coldness* and *torpor* in the affected side of the face, with severe, spasmodic pain; or tensive pressure in the bones adjoining the ears, with a sensation of creeping or crawling, and aggravation or renewal of the sufferings in the evening, and when in a state of rest; flow of tears; redness of the face, etc.

*Dose:* Three globules, as directed for *Belladonna*.

GELSEMINUM should be given when the pain comes on in distinct paroxysms, and is very severe, accompanied with twitching and drawing in the muscles around the part affected; the parts in and around the orbit of the eye are most commonly affected.

*Dose:* Three globules, as directed for *Belladonna*.

COLOCYNTH. Violent rending and darting pains, which chiefly occupy the left side of the face, are aggravated by the *slightest touch*, and extend to all parts of the head, temples, nose, ears, teeth, etc.; mitigated by perfect rest, and by external warmth.

*Dose:* Three globules, as directed for *Belladonna*.

ARSENICUM should be given when there is a tendency to periodicity in the attacks or paroxysms, and the pains partake more especially of a *burning, pricking*, and rending character, and are experienced chiefly around the eye, and occasionally in the temples; the sufferings being occasionally of so severe a description as almost to drive the patient distracted; great anguish; excessive prostration, with desire for the recumbent posture; sensation of coldness in the affected parts; exacerbation during repose, from fatigue, in the evening, when in bed, or after a meal; temporary amelioration from external heat.

*Dose:* Three globules, as directed for *Belladonna*.

CHINA should be selected when, as in the instance of the foregoing remedy, there is a tendency to periodicity in the attacks, and when the pains are excessive, attended with extreme sensibility of the skin, and consequent *aggravation from the slightest touch*; the pains are located below the eye and in the cheek; great prostration after the paroxysms.

*Dose:* Three globules, as directed for *Belladonna*.

VERATRUM is more especially indicated by insupportable pains, which almost drive the patient to distraction; excessive weakness, even to fainting; general chilliness; exacerbation of suffering on getting warm in bed, or towards morning; temporary relief on moving about.

*Dose:* Three globules, as directed for *Belladonna*.

SPIGELIA is frequently a useful palliative remedy in all cases when the pain is excessive; but it is more especially required when the pains



are of a jerking, tearing character, exacerbated by the slightest touch or by movement of the affected parts, or when they appear to shoot from the center of the brain to the sides of the head, or to the ears; flow of water from the eyes and nose; further, when the pains partake of a burning and pressive aching character, and have their seat in the zygomatic process; glossy tumefaction of the affected side of the face; excessive agitation and anguish; rheumatic pains elsewhere.

*Dose:* Three globules, as directed for *Belladonna*.

MEZEREUM is more especially indicated for burning, pressive pains, coming very suddenly, and which leave the parts numb, attended with chilliness and shuddering; they are worse from eating warm food, or from entering a warm room: there is frequently redness and burning of the throat, and a stiff feeling of the jaws. It is especially suited after abuse of Mercury, or in syphilitic persons.

*Dose:* Three globules, as directed for *Belladonna*.

IRIS VERSICOLOR is adapted to such cases as are associated with *sick headache*, where there is a good deal of vomiting of a sweetish mucus, and sometimes of bile.

*Dose:* Three globules, as directed for *Belladonna*.

NUX VOMICA should be administered when the pain is mostly below the eye, and the eye is inflamed and watery; profuse watery discharge from the nostrils; the affected side feels numb. The patient is morose, irritable, belches a great deal, and is constipated. It is especially suitable after abuse of coffee, liquors, or drugs.

*Dose:* Three globules, as directed for *Belladonna*.

RHUS TOX., will be found useful for drawing, burning, tearing pains in the face, and a feeling as though the teeth were too long; *very great restlessness*, and tossing about; particularly adapted, if brought on by getting wet, or after wet weather.

*Dose:* Three globules, as directed for *Belladonna*.

BRYONIA may be administered, particularly in cases of rheumatic face-ache, when the pains are of an aching, pulling, or tearing description, exacerbated by movement; irritability of temper and general tendency to rheumatic attacks.

*Dose:* Three globules, as directed for *Belladonna*.

HEPAR SULPHURIS is also of much service against face-ache resulting from excessive mercurial treatment, and is more particularly indicated when the pains are so much aggravated by the pressure of the teeth or by eating, that the patient is afraid to allow the crowns of the teeth to meet; pains of a drawing or jerking character, often aggravated by entering a warm room, or by the warmth of the bed at night; also when there is great sensibility of the cheek and base of the temple, with extension of the pains into the ears and up the side of the face.

*Dose.* Three globules, as directed for *Belladonna*.

SULPHUR is frequently a medicine of considerable value whether for the treatment of the immediate acute symptoms (as subjoined), or for the *after-treatment*, in cases in which abuse of Mercury has developed a pre-



disposition to face-ache. This remedy is especially indicated by throbbing, drawing and jerking, or burning, aching pains in the bones of the face, and in the jaws and *all of the teeth*, whether sound or decayed; or when the pains involve the whole face, and even head, and are accompanied with determination of the blood to the head, redness and swelling of the cheeks and of the nose, and with suffused redness and inflamed appearance of the eyes; or when there are also aching, weary sensations in the limbs or in the small of the back, or catching, stitching, darting *pains in the ears*: general chilliness and susceptibility to the least current of air, with sleeplessness during the whole or greater part of the night, and drowsiness towards morning or in the day; cold water or cold applications, and mastication, greatly aggravate or provoke a return of the pains, which are also renewed or aggravated generally towards evening, at night, or by currents of air.

*Dose*: If against the immediate *acute symptoms*, three globules, as directed for *Belladonna*. If for *after-treatment*, four globules in a teaspoonful of water, the first thing in the morning (fasting), for ten days, (or until the earlier development of change); then pause ten days; after which the course may be repeated, as before, if any tendency to a return of the attack should yet be perceptible, or be dreaded.

PHOSPHORUS is indicated by tearing pains which occur, more especially, about the left side of the face, and which are further characterized by determination of blood to the head, and by a sensation of tightness in the skin of the face, by aggravation upon the slightest touch or movement of the parts, or by pains extending deep into the ear, and to the root of the nose, and often attended with a confused, shell-like roar in the ears.

*Dose*: Three globules as directed for *Belladonna*.

PULSATILLA, on the other hand, is to be preferred when the pains are usually aggravated towards evening, and at night, or in the morning when seated, and when they are somewhat moderated in the open air; or further, when there is general chilliness with depression of spirits; or again, when the patient is of phlegmatic temperament.

*Dose*: Three globules, as directed for *Belladonna*.

DIET AND REGIMEN.—In cases of an inflammatory character, and during the prevalence of local heat, etc., or of general disturbance, of more or less intensity, the precautions directed in the general article on "FEVERS" should be observed; and in *all* cases of Nerve-pains, abstinence from fermented, spirituous, or other *stimulating* drinks, or from the use of highly seasoned food, is usually of great importance.

## CHAPTER VIII.

## DISEASES OF THE EYE.

## OPHTHALMIA.

## INFLAMMATION OF THE EYES, ACUTE AND CHRONIC.

Ophthalmia is a term applied to inflammation of the eyes, whether of the acute or Chronic form. All parts of the eye are subject to inflammation, more especially its outer covering (conjunctiva) and the inner surface of the lids. At this place *catarrhal*, *ophthalmia*, *purulent ophthalmia*, and *inflammation* of the *iris* will be considered.

## CATARRHAL OPHTHALMIA.

**SYMPTOMS.** The conjunctiva, or white of the eye becomes swelled, and of a scarlet color, being more or less covered with blood vessels, presenting the appearance of what is usually termed *bloodshot*, with this there is a sensation of heat, smarting, and pain, as if particles of sand were in the eye, and which pain is aggravated by rubbing the eye. There is much pain and uneasiness on exposing the eye to the light, and sometimes even on the least motion of the eyeball, so that the patient usually keeps the lids closed. A copious flow of hot or excoriating tears is also present. When the disease is very violent, or, in irritable habits, febrile symptoms are manifested.

**CAUSES.** Catarrhal ophthalmia may be produced by exposure to cold, sudden changes of temperature, blows and other injuries to the eyeball, irritating vapors, foreign particles in the eye, improper exposure of the eye to strong light, overtaking the eyes by reading or writing late at night, intemperance, and other causes similar to those producing inflammation of other mucous surfaces. This disease may be distinguished from rheumatic ophthalmia, by the presence of headache, the greater intolerance of light, and the severe, throbbing pain common to the latter, besides in catarrhal ophthalmia the blood vessels are tortuous and of a scarlet red color, and in the rheumatic form, they are straight, hair-like radiated and of a pink or violet hue: in rheumatic ophthalmia the sensation of roughness or foreign bodies in the eye is never present. There is seldom any danger to be apprehended in catarrhal ophthalmia when properly treated.

## PURULENT OPHTHALMIA.

**SYMPTOMS:** Usually a great itching is felt in the eye, or a sensation as if a particle of dust were between the lids and the eyeball, and this usually happens at night; this is succeeded by a sticking together of the lids, generally in the morning, owing to a secretion of mucus. The lids are somewhat stiff, there is great and uniform redness of the eye, but without pain, tension, or intolerance of light, and a watery fluid is discharged. The disease soon extends to the globe of the eye, with high, vascular action and bright redness, great tumefaction of the membrane, and increased discharge. The conjunctiva suddenly swells, and becomes considerably elevated around the cornea. The cornea, appearing,

as it were, at the bottom of a pit. This swelling is called *chemosis*, and is often so great as to overlap and nearly cover the cornea. The eyelids swell, and are almost immovable. The discharge is profuse and of a yellow color, and may continue for ten or fifteen days without much change. Finally, the chemosis begins to shrink, the discharge diminishes and becomes thin and gleet, and the parts, which were the first attacked, are the last in which the disease disappears. The inflammatory symptoms vary from a mild character to one of great violence, being accompanied with sharp, lancinating pain situated deep in the eye-ball, and which is usually worse at night. Sometimes a deep-seated, throbbing pain in the eye comes on in paroxysms, or it may be violent and continuous, without any mitigation until the cornea bursts. The disease may terminate in bursting of the cornea, abscess of cornea, ulceration of the cornea, opacity of the cornea, thickening or granulation of the lids.

Purulent ophthalmia may be discriminated from catarrhal by the chemosis, the bright red membrane, and the profuse purulent discharge. The right eye more frequently suffers, and more severely, than the left, though the discharge may attack either or both.

CAUSES: The disease is propagated by contagion. It frequently occurs epidemically, and seems to depend upon some peculiar condition of the atmosphere. And, under some circumstances, there is no doubt but it may be produced by exposure, injuries and other circumstances, that will occasion the catarrhal form.

### INFLAMMATION OF THE IRIS.

Inflammation of the Iris, or Iritis, may be accompanied with rheumatism; sometimes with gout, and not unfrequently with syphilis; hence the names, rheumatic iritis, syphilitic iritis, etc., have been applied to these various forms. The disease is, however, in all instances, only a modification of one and of the affection.

SYMPTOMS: Uneasy sensations are experienced in the neighborhood of the eye, with pains about the forehead, brow, and orbit, extending to the side of the head. There is, also, a redness of the sclerotica, or white of the eye, with intolerance of light, and watery discharge, as these symptoms increase in severity. The iris, or that part of the eye which surrounds the pupil, and which we judge of the color of the eye—whether blue, black, etc.,—becomes involved. Its color undergoes a change; first, in the lesser circle, which becomes of a darker hue, and afterwards in the greater, which becomes greenish, if it were originally blue or greyish; and redish, if it were brown or black. The pupil is contracted, its opening being deprived of the bright, black color it naturally possesses, and the motions of the iris are impeded. Headache and feverish disturbance of the system, generally present. After a violent attack, with great diminution of sight, the symptoms subside, the eye recovers, and sight is restored. The iris is found to be connected to the capsule by adhesions of white color. The inflammation returns again, and again new adhesions take place; the pupil becomes more and more contracted, and finally vision is lost. Occasionally the first attack may be so violent as to occasion loss of sight.

CAUSES: It may be produced by cold, and frequently attended with rheumatism, syphilis, etc. Some rheumatic persons have an attack, or more, every year, in which the sight becomes gradually destroyed.

#### ALLOPATHIC TREATMENT.

SIMPLE OPHTHALMIA (Inflammation of the Conjunctiva). In a person who is robust, over-stimulated, or over-fed, a brisk cathartic of a tablespoonful of Epsom or Rochelle Salts, or a Siedlitz Powder, should be given, and repeated in four hours, if a free cathartic has not taken place. Such a patient should, also, have a low diet.

A weakly patient, or one with impoverished blood, or one that habitually feels tired and sleepy on rising in the morning, after a full night's sleep, should have hearty, blood-making, but plain, nutritious food; also, tonics of Bark and Iron. One or two tablespoonsful of the Suffusion (tea) of Cinchonia Bark (one ounce of Bark to a pint of water) may be given in doses of one or two tablespoonsful before eating. Tincture Muriate of Iron may be given in doses of from ten to twenty drops well diluted in sweetened water, after meals. The mouth should be rinsed with water, after taking the Iron. The Citrate of Iron and Quinine, in from three to five grain doses, will fulfill all the indications.

Rest, and temporary protection from light, will be required.

Frequent application of water, either cold or warm, guided by the feelings of the patient. Quite warm applications are generally preferred and are more useful.

One of the best stimulating washes is a solution of six grains of Alum or one grain of White Vitriol (Sulphate of Zinc) and two to four grains of the Sulphate of Morphine, in two ounces of warm water. A few drops may be dropped in the eye, two to four times a day, with a quill or Camel's hair brush.

Alum Curd, made by stirring or rubbing a lump of Alum in the white of an egg, is frequently applied in domestic practice, and with benefit. After using these stimulating applications for a few days, their use should be suspended for a day or two, and observe the result; for it does happen, sometimes, that the irritability of the congestion is kept up by their prolonged use.

The extreme pain should be relieved, if necessary, by an occasional dose of Opium and Hyoscyamus. For an adult, a quarter of a grain of Morphine or twenty drops of Laudanum, with one or two teaspoonsful of Tincture of Hyoscyamus, are suitable doses. The Morphia, or Opium, may be given, with one grain of solid extract of Hyoscyamus, in pill. For a child, Paregoric (Camphorated Tincture of Opium) and Tincture of Hyoscyamus, should be used in equal quantities.

Some simple ointment, or oil, applied to the edges of the lids will add to the comfort, particularly at night.

When the ophthalmia continues and becomes catarrhal (mucus forming), the treatment above recommended for simple application will be appropriate. The tonics recommended will, generally, be more urgently needed.

Frequent bathing of the eyes, with warm water, will be useful. The



edges of the lids should be smeared with Brown Citrine Ointment, or, in its absence, with Castor Oil, or some simple ointment.

The stimulating wash, which is followed most rapidly by benefit, is Nitrate of Silver—its use requires the direction of a physician.

Two or three drops of a solution of Sulphate of Atropine (two grains to the ounce of water) should be dropped in the eye two or three times a day; or a solution of half a dram of Extract of Belladonna to the ounce of water.

Purulent Ophthalmia usually occurs in persons feeble in general health, and where such is the case, tonics and nourishment are urgently called for. *Citrate of Iron* and *Quinine* should be given, in doses of from three to five grains dissolved in water or syrup, three times a day; or the following: Take of *Citrate of Iron* and *Strychnine* a dram and a half *Quinine* half a dram, *Citric Acid* a dram, *Simple Syrup* four ounces. Mix. Dose, a teaspoonful three times a day; or the bitter infusions and tincture of iron, as recommended in simple ophthalmia, may be given instead. The diet should be of nutritious, blood-making varieties, but plain. Fresh meat, milk, and eggs, may be allowed.

A furred tongue and constipation will call for one or two *Compound Cathartic Pills*, once or twice a day, until the bowels move. Should the patient be robust and hearty, the tonic treatment should not be pursued, but an active cathartic should be given. Four *Compound Cathartic Pills* may be given; or doubtless a full dose of Salts will answer the purpose. In such cases, also, the diet should be reduced.

Pure air is a necessity, and the patient must not be confined in bed, if it can be avoided.

The greatest care should be exercised to avoid communicating the disease to others. No other person should wipe on the towel or napkin used by the patient. If only one eye is affected, the well eye ought to be hermetically closed until all danger of contagion has passed.

The great danger is, that the *cornea* may become *ulcerated* and *lough*, causing complete or partial blindness.

I should strongly advise that no case should be treated without a physician.

The local treatment will consist of repeated cleansing of the eye by carefully injecting warm water with a syringe; a solution of Nitrate of Silver, three grains to the ounce of distilled water, should be dropped in the eye twice a day or oftener; after a few days a strong solution of alum, ten grains to the ounce of water, should be substituted for the Nitrate of Silver and vice versa.

During the course of this disease, a solution of Sulphate of Atropine (two grains to the ounce of distilled water), should be dropped in the eye two or three or more times a day, according to the urgency of the symptoms. If the Atropine, a solution of half a dram of Extract of Belladonna, to the ounce of water may be used instead.

The pain may require relief by the administration of anodynes once a day or oftener. Opium and Hyoscyamus, one grain each of the extract: or a quarter of a grain of Morphine, and a grain of the Extract of Opium, or twenty or thirty drops of laudanum, with two teaspoonsful of Tincture of Hyoscyamus.



Wet cups or blisters to the temple may be useful.

Attendants often assisting the patient should immediately wash their hands to avoid carrying the disease to their own eyes.

*Granular Ophthalmia* calls for the same general treatment as is recommended for the other forms of ophthalmia, and is appropriate under the same state of health. The form of iron I generally give is the Pyrophosphate in solution with Iodide of Potassium, the latter having a favorable effect on the disease. Take of Iodide of Potassium five drams, Pyrophosphate of Iron half a dram; dissolve each in two ounces of simple syrup with trituration in a mortar and mix. Give a teaspoonful after each meal. The bitter infusives recommended in simple ophthalmia may be given, if the appetite is poor. The diet should be good and abundance of exercise taken in the fresh air.

The edges of the eyes should be anointed each night with Brown Citrine ointment. The nice local treatment demands a skilled physician; it consists principally in inverting the lid and applying the solid stick of Sulphate of Copper (blue stone) across the granulations. Before the lid is restored to its natural position, it should be bathed with a camel's hair brush, dipped in sweet oil. Another useful agent, applied in the same way, is Nitrate of Silver; it should be *fused* with Nitrate of Potash, as the pure stick is too caustic. The lid should be washed with a camel's hair pencil, dipped in water, after each application. Liquor Potassæ, applied with a camel's hair pencil to the granulations, is useful. These agents can be used in succession as the case continues. Once a day is frequent enough for their application, and the physician should use them. As a wash a solution of Alum, three grains to the pint of distilled (or rain) water is useful. If the edges of the lids are irritable or stick together at night, they should be anointed each night with *Brown Citrine Ointment*, *Spermaceti Ointment*, *Castor Oil*, or lard.

**TREATMENT OF CHRONIC OPHTHALMIA.**—The use of artificial light should be avoided, also ill-ventilated rooms and working upon small objects. If it is impossible to do this, care should be taken to obviate the ill effects. Great relief may be had by having a pale, blue chimney, or shade to the lamp or gas jet. Free exercise in the open air should be taken and plenty of regular sleep. The diet should be wholesome, consisting largely of fresh beef, mutton, or chicken, milk, and eggs. Some of the tonics recommended in other forms of ophthalmia will be useful, if the patient is in feeble health. The bowels should be kept regular. The eyes should be frequently bathed with warm water, and a solution of alum or sugar of lead three grains to the ounce of pure rain water, or a solution of Tannin, ten grains to the ounce of water dropped in the eyes night and morning. It is sometimes well to bathe the closed lids after the use of the eye water, with cold water. The edges of the lids should be anointed each night with *Brown Citrine Ointment*.

Continual watering of the eyes in the wind should lead to the examination of the lachrymal duct by the physician. In all tedious cases, which cannot be traced to a previous attack of catarrhal ophthalmia, or obstruction of the lachrymal duct, the edges of the lids should be examined

to see whether an irregularly growing eyelash may not be the cause of the irritation.

The irritability of the eyes of students is frequently relieved by bathing the eyes in very warm water, and the red edges of the lids can be prevented by the use of Brown Citrine Ointment.

THE OPHTHALMIA OF NEWLY BORN CHILDREN.—If the attack is a severe one, recovery may depend on the health and vigor of the child. The health of the mother, and her ability to nurse the child properly, will govern, in a measure, the chances of the child's recovery with a useful eye. The child may need feeding, but ought not to be weaned, for almost as surely as the cornea becomes ulcerated, the eye will be lost, if the attempt is made to raise the child "by hand." The preventive treatment will consist chiefly in the avoidance of the causes which may originate the disease, which are, besides contact with the unhealthy discharges of the mother during birth, etc., rude washing with soap and cloths by the nurse, cold, exposure to strong light and contagion.

The eyes should be thoroughly and frequently cleansed with warm water. Probably this can be best done by a small glass syringe, introducing it at the outer corner of the eye and *gently* injecting. No harshness should be used, but firmness, for the eye must be thoroughly cleansed. After each cleansing, which should be as often as every hour, a solution of Sulphate of Zinc one grain to the ounce of distilled water or pure rain water, should be dropped in the eye. In severer cases, (which should be in the hands of a skillful physician), a stronger solution should be used. Sulphate of Zinc three or four grains, and Alum six or eight grains to the ounce of water.

In cases which are not too severe to be treated without a physician, a solution of one grain of Sulphate of Zinc in from two to four ounces of water, will be perfectly effectual. A soft piece of muslin, wet with water, folded several times, should be laid over the eyes and tied loosely, but firmly enough to be kept in place. A skillful physician should have charge of the case, if possible.

Scrofulous Ophthalmia is characterized by small serous vesicles which arise on the conjunctiva. It is especially liable to invade the cornea. The affection is especially liable to occur in feeble persons whose nutrition is not good. Good diet of a plain but nutritious kind is especially called for. Fresh meats, cream, milk, and raw eggs are suitable. The Syrup of Iodide of Iron in doses of twenty drops after meals, seems especially serviceable; or the Tincture Muriate of Iron may be given in similar doses, well diluted, with sweetened water. If the appetite is poor, an infusion of Peruvian bark, Gentian or Quassa, made by macerating an ounce in a pint of hot water, may be given.

*Dose:* Half a wineglass to a wineglassfull.

Or bitter tonic and iron can be given together by using the Citrate of Iron and Quinine, in doses of three to five grains three times a day.

A solution of ten grains of Tannin to an ounce of water is a good application in this and all forms of conjunctivitis, or *finely levigated* calomel may be dusted over the vesicles, by means of a camel's hair brush, once a day. The invasion of the cornea should be met with the solution of Sul-

phate of Atropine, four grains to the ounce of distilled water, dropped in the eye with a quill or clean camel's hair brush, two to six times a day, according to the intensity of the pain and inflammation. The edges of the lids should be kept annointed with Brown Citrine Ointment.

If a skillful physician can be obtained he ought to have charge of the case.

#### HOMŒOPATHIC TREATMENT.

We will here, to save space and needless repetition, mention all the remedies needed in the treatment of the different forms of this affection, viz., Acute, Chronic, Simple, Scrofulous, Purulent, Granular, etc., and that arising from external injuries. The remedy which will be best suited to the treatment of any particular case, can be readily selected by comparing the symptoms of the case with those mentioned under each remedy. Of course, you will not find all the symptoms that may arise in any case under the proper remedy, but the leading symptoms for which that remedy can be fully recommended as curative will be found, and, on account of the great difference in different cases, there will be more symptoms mentioned than are likely to be found in any *one* case.

ACONITE is a firm remedy in inflammation of the eyes where there is a pus-like discharge. The inflammation runs high; dry hot skin, and full quick pulse; intense redness and swelling of the affected parts, attended with acute pain. *Great* intolerance to light. Fear, anxiety, and great restlessness; flushed face and throbbing in the arteries of the neck.

*Dose:* Six pills in three tablespoonsful of water, of which give one teaspoonful every one to three or four hours, owing to the intensity of the symptoms, also as an external remedy see page 94.

BELLADONNA in acute Ophthalmia, with very *great* intolerance to *light* or *noise*. Vivid redness of the sclerotica (white of the eye) with discharge of hot salt tears, or great dryness of the eyes with sensation as if there was dust or sand in the eye. Sharp pains in the eyeballs extending to the brain. Pains which appear suddenly and disappear just as suddenly. Dimness of vision. Throbbing headache increased by motion.

*Dose:* As for Aconite.

CALCAREA CARB., for scrofulous sore eyes, with inflammation, redness and pus or pus-like secretion from the eyeballs, swelling and redness of the eyelids, which are agglutinated (stuck together.) Stinging pains, worse at lamplight. Specks and ulcers on the eyeball, constant desire to keep the eyes in the darkness, swelling of the glands about the neck and eruption on the hairy scalp, are additional symptoms calling for the use of Cal. Carb. Also *chronic* inflammation of the eyes.

*Dose:* A powder or four pills every morning and evening. If the improvement is not satisfactory, give a single dose of Sulphur, and after three days, or in acute cases sooner, return to Cal. Carb.

ARSENICUM.—Inflammation of the lining membrane of the eyelids and the outer covering of the eyeball (conjunctiva) and even of the deeper coats of the eyeball, with dark redness and congestion of the bloodvessels. *Burning* pains; the parts burn like fire. Inflammatory swelling of the lids. Specks or ulcers on the eye. Nightly agglutinations of the lids.

*Great anguish and restlessness. Intense thirst for small quantities of water very often.*

*Dose:* As directed for Aconite.

MERCURIUS.—For *scrofulous ophthalmia*. Violent inflammation and redness of the eyes. Cutting, burning pains, or pressure in the eyes, as if from sand. Excessive sensitiveness of the eyes to the glare of fire, or the light. Little blisters and pimples on the eyeball. Little boils or styes, scurfs around the eyes and on the margins of the lids. In inflammation of the iris (colored parts of the eye) this medicine is of great service. It should *never* be given in large doses.

*Dose:* As for Calcaria.

PULSATILLA.—Aching, or burning and smarting irritation in the eyes as if from copious secretion of mucus. Disordered stomach, foul tongue, with chilliness towards evening followed by feverish heat. Piercing, shooting, pricking pains in the eyes with bright redness and flow of tears, especially on looking at the light or going into the open air, or on the other hand excessive dryness of the eyelids, especially in the evening, sensitiveness with disposition to weep.

*Dose:* As for Aconite.

ARNICA is a very superior remedy when the inflammation is the result of an external injury. Use it simultaneously with its external use. See external applications, page 94.

*Dose:* Internal, four pills every two to six hours. Application (external) five drops to two tablespoonsful of water. Apply four times daily.

#### SHORT-SIGHT, NEAR-SIGHTEDNESS.

PULSATILLA AND SULPHUR, according to indications, may be mentioned as of the chief importance in the treatment of short-sightedness when this affection remains as an after-effect of acute inflammation of the eyes.

*Dose:* Of either medicine, as selected, give three globules in a teaspoonful of water, morning and evening, for a week (or until the earlier development of improvement or change); then pause four days, after which the course may, if necessary, be repeated as before, and so on from time to time until amelioration or change.

ACIDUM PHOSPHORICUM is to be preferred in cases in which short-sightedness occurs as the consequence of a severe attack of Typhus, or has been occasioned by debilitating loss of blood or other animal fluids.

*Dose:* Three globules, as directed for Pulsatilla and Sulphur.

CARBO VEG., ACIDUM NIT., OR SULPHUR will be appropriate for the treatment of short-sightedness, *when this condition* can be traced to excessive use of *Mercury*.

*Dose:* Of *Carbo veg.* or *Acidum nit.* give three globules in a teaspoonful of water, every morning,—or, of *Sulphur*, six globules in a table-spoonful of water, every morning the first thing (fasting), for ten days (or until the earlier development of *new symptoms*, improvement, or change); then pause a week, after which the course may, if necessary, be repeated as before, and so on, from time to time, until manifest amelioration or change.



## BLINDNESS.

In common use this name implies persons who are totally blind, or persons who possess some powers of vision, but not enough to enable them to distinguish the forms of objects. The causes of blindness are both ante-natal (before birth), and post-natal (after birth.)

It is contended by some, and likely with truth, that influences acting on the mother's mind (psychological) may induce blindness in the offspring. As when the mother has received a powerful nervous impression from witnessing some horrible spectacle, or an extremely disgusting case of sore eyes, or malformation of the eyes. Many cases have been adduced which establish this as a truth in some cases, but not by any means with enough to establish the theory as a rule or law of psychological effect. The ante-natal causes which are now acknowledged to produce blindness, are the intermarriage of near relations, *especially* first cousins, scrofula and syphilis. In intermarriage deafness follows more frequently than blindness; in very many, indeed, in almost all of those cases where near relatives have married, the offspring shows a marked tendency to deficiency of the nerves of special sense; but in most cases ante-natal, as well as post natal blindness is caused by imperfection or disease of the optical apparatus which is accessory to the nerves of special sense, or, in other words, the defect generally exists in some part of the globe of the eye. Hereditary blindness is not frequent. Of 700 blind persons in the institutions of Philadelphia, whose parentage is known, only 12 had either parent blind. In Paris, of several hundred children born there, of whom one or both parents were blind, not *one* was blind at birth.

After birth, the principal causes of blindness are: 1. Special diseases of the eye, such as purulent ophthalmia, inflammation of the cornea and of the iris, cataract, or opacity of the crystalline lens, and amaurosis, or paralysis of the optic nerve (*which see in index*.) 2. General diseases, whose sequelæ attack different parts of the eye, as small-pox, scarlet fever, measles, typhus fever, and other inflammatory fevers, and scrofula. 3. Injuries from blows or wounds, and from malpractice; the latter being the *most fruitful of all causes*. Hence we say, in any diseases of the eye avoid all ignorant persons and experiments of every kind and nature, and employ only the highly skilled; if you can't do that, better let nature alone, using only water to allay the inflammation.

TREATMENT.—For Blindness caused by paralysis of the nerve of vision, from overtaxing the eyes, there is nothing will excel the *skilled* and *intelligent* use of ELECTRICITY. We are very far from meaning by *skilled* those ignorant criminals who go about the country with their machines *shocking* every one they can persuade to take hold of it.

## HOMŒOPATHIC TREATMENT.

ATROPIN, an alkaloid of Belladonna, is a prime remedy where blindness is the result of paralysis; it should be used in *small* doses, *not* frequently repeated.

## SUDDEN ATTACKS OF BLINDNESS.

ACONITUM is the medicine of chief importance in cases of this kind when characterized by a general fullness of the vessels, or by a full, hard



pulse, and should be given, first, against the congestion which is identified by the development of this symptom as affecting the vessels of the head. It is the more appropriate when this symptom occurs associated with derangement of the stomach, and the congestion of the vessels of the head is recognized as of sympathetic origin.

*Dose:* Three globules in a teaspoonful of water, repeated at intervals of twelve hours, until general improvement or change.

CAUSTICUM for sudden and frequent loss of sight, as from a pellicle drawn over the eyes, or as if looking through a mist.

*Dose:* Three globules, as directed for *Aconitum*.

GELSEMINUM is indicated by sudden and total blindness, with giddiness; the eyes look heavy and dim.

*Dose:* Three globules, as directed for *Aconitum*.

MERCURIUS will prove of service when there are momentary paroxysms of blindness, the eyes being very sensitive to light or the glare of a fire.

*Dose:* Three globules, as directed for *Aconitum*.

CICUTA VIROSA should be given when there is frequent vanishing of sight, as if from absence of mind, with great giddiness, particularly when walking; when reading, the letters appear to move to and fro irregularly.

*Dose:* Three globules, as directed for *Aconitum*.

PHOSPHORUS is most valuable, when the obscuration of vision occurs at twilight or at night; objects appear as if seen through a thick gray veil; blackness, or black points, or sparks before the eyes.

*Dose:* Three globules, as directed for *Aconitum*.

PULSATILLA should be selected in cases where there is a sensation, as if the dimness of sight could be removed by wiping the eyes; great dread of light; frequent and copious lachrymation; the pupils are contracted.

*Dose:* Three globules as directed for *Aconitum*.

### WEeping—EYE.

#### FISTULA LACHRYMALIS. WATERY-EYE.

These names are applied to an ulcerated opening in the little sac or bag, which is situated in the inner corner or angle of the eye, and which is technically named the lachrymal sac. Its office is to receive the tears and mucus of the eye, in order that they may be transmitted from thence to the nose. In the early stages, the affection consists of a thickened condition of the lining membrane of the sac, and the adjacent lachrymal parts, the result of inflammatory action, and in consequence of which the tears and mucus are obstructed in their passage to the nose, and hence, escape by passing down over the cheek, giving rise to an habitually weeping-eye, and an adhesion of the lids after sleeping. Children of a scrofulous habit, and adults who have suffered from rickets, or from swelling of the glands about the neck, groins, or other parts in youth, and who are more or less troubled with derangement of digestion, are the most frequent subjects of the disease. When the disease is not checked, or in consequence

of frequent returns of acute inflammation, sloughing ensues, the contents of the tumor escape through the break thus made in the skin. When the complaint has reached this stage, it presents a much more unsightly appearance, and if neglected or mismanaged, as it so frequently is by means of severe and irritating remedies, extensive inflammation and excoriation, are produced in all the surrounding parts, in some rare cases a diseased state of the bones of the nose accompanies or precedes this malady.

### HOMŒOPATHIC TREATMENT

In recent cases the cure is easily and speedily accomplished by homœopathic treatment, without the aid of the painful, irritating, and disfiguring local means resorted to in some cases. In those of long standing or of complicated character occurring in scrofulous, cancerous, or otherwise debilitated constitutions, the successful issue is necessarily of more difficult and tedious attainment.

*ACONITUM* is to be selected in all recent cases, but particularly when the inflammation and pain are considerable, when this remedy is of much efficacy.

*Dose:* Of a solution of six globules to two table-spoonsful of water, give a teaspoonful every two hours, until the pain and redness are removed or diminished, or until other symptoms occur to indicate other treatment.

*PULSATILLA* is more especially appropriate for the treatment of persons of phlegmatic temperament and of mild disposition, and when the symptoms have a tendency to become aggravated in the *evening or at night*. In such cases *Pulsatilla* should be administered twelve hours after the last dose of *Aconitum*.

*Dose:* Three globules in a teaspoonful of water, night and morning.

*NUX VOMICA* is more especially appropriate for the treatment of persons of sanguine or bilious temperament and of irascible disposition, the symptoms, generally speaking, tending to become exacerbated in the *morning*.

*Dose:* Three globules as directed for *Pulsatilla*.

*GRAPHITES*, *CALCAREA C.*, *SILICEA*, OR *SULPHUR* are frequently required to complete the cure, or to overcome the tendency to recurrence of the disease, after previous treatment, according to the instructions above afforded. In the severer forms of the complaint occurring in persons of bad constitutions, with or without implication of the nasal bones, or in uncomplicated cases of *long standing*, occurring either in children, with or without glandular enlargements, or in adults, they are still more frequently needed

*Dose:* Of either as for *Pulsatilla*.

### BLOODSHOT EYE.

This derangement may arise from a blow or fall, the act of retching, vomiting, or violent coughing, crying, etc. It presents a bright, scarlet appearance in most instances at the commencement, but usually assumes a livid hue at a subsequent period. The affection generally disappears of

itself; but as it is occasionally liable to prove exceedingly obstinate, the subjoined method of treatment may be required, or such other management as may be more particularly enjoined in the article on "EXTERNAL INJURIES," or also in that on "INFLAMMATION OF THE BRAIN."

ARNICA should be employed internally and externally when this derangement has been caused by *external injury*, such as a blow or fall, and does not disappear spontaneously, in which case this remedy will quickly promote absorption, and remove the unsightly appearance.

*Dose (Internal):* Three globules in a teaspoonful of water, repeated after twelve hours, and subsequently, if necessary, at intervals of twenty-four hours, until the discoloration is removed.

*Application (External):* To two tablespoonsful of water, add six drops of the concentrated *Tincture of Arnica*, and bathe the eye or eyes freely with this lotion, three times a day, until the discoloration disappears,—only, however, during the internal administration of the same medicine as above directed.

BELLADONNA is preferably indicated when the Bloodshot Eye is associated with symptoms of *fullness and throbbing of the vessels of the neck*, flushing of the face, oppressive pain in the head and the like, even in cases in which the direct cause of these symptoms is distinguished in a blow, fall, or other external injury; or again, in cases in which the Bloodshot Eye appears as a symptom of cerebral derangement, as evinced by the associated symptoms, conditions, and circumstances

*Dose:* Two globules in a teaspoonful of water, repeated at intervals of four hours, until manifest improvement occurs, or such change should ensue as to render other treatment necessary.

### CATARACT.

By this name is understood a partial or general turning white (opacity) of the more vital parts of the eye. The formation of a cataract is generally slow, requiring weeks, months, or years for its complete development. It may appear in one eye or both; but when the former is the case, the other eye is generally effected, either sooner or later. In cataract all objects appear to be encompassed with a cloud or mist, especially, those that are white.

This disease is beyond the means that can be used at home, and must be treated by a good physician who makes this his business. In his hands a small operation on the eye, will usually entirely remove the difficulty.

### CROSS-EYES.

#### STRABISIMUS. NEAR-SIGHTED.

This trouble is usually present from birth, (congenital), and can then only be cured by a surgical operation, by which the small muscle which turn the eye towards the nose is entirely, or partially severed, when the eye will very soon, if not at once, return to its proper position. This operation need only require two or three minutes, and give but little pain and a great help to any one so afflicted. There is another variety which is the result of too constant and close application of the eyes, especially by lamp light, as in children over tasked at school, sewing girls, etc., etc. This can be cured by at once quitting the work, that is the cause of the overstraining. As a rule a little *Bell.* will help very materially in bettering this condition.

## STYE.

**SYMPTOMS.**—This is a little hard tumor, appearing like a small, dark-red boil, generally in the corner of the eyelid, attended with severe inflammation, and frequently causing fever; considerable pain and suffering. It suppurates slowly and imperfectly; usually being from four to six days, and has no tendency to burst spontaneously. Presents a small yellow or greenish-yellow speck in or near the center; when ready to be opened touch lightly with a needle, or other sharp point and apply a little pressure.

## HOMOEOPATHIC TREATMENT.

**PULSATILLA** alone, will, in most cases, suffice to remove the styte if given upon its earliest appearance. It is a *sure cure*.

*Dose:* Give three globules in a tablespoonful of water, morning and evening, until the styte is removed, or such change takes place as to require other treatment.

**HEPAR SULPHURIS** should be given when matter threatens to form (indicated by increased swelling and heat, usually attended with *throbbing*) in order to expedite the ripening of the tumor.

*Dose:* Two globules in a teaspoonful of water, repeated six times, at intervals of three hours.

**STAPHYSAGRIA** should be given two days after the last dose of any medicine previously administered, to complete the cure, particularly when the swelling degenerates into a hard white tumor.

*Dose:* Three globules in a teaspoonful of water, night and morning, for a week (or until the earlier manifestation of decided improvement or change); then pause four days, after which the course may, if necessary, be repeated as before, and so on, until the dispersion of the tumor, or the accidental occurrence of new symptoms. But if no effect be produced within four days after the second course, proceed with the next medicine.

**SILICEA** should be employed after the foregoing medicine in some cases, in which, after a second course, the treatment just recommended has failed to produce any effect whatever, a condition which sometimes prevails in bad constitutions.

*Dose:* In every respect as directed for *Staphysagria*.

**ARSENICUM, LYCOPodium, SULPHUR** and **AURUM** may be required in addition to those above prescribed, in cases of styte which occur as associated with marked scrofulous taint of constitution. *Aurum*, it may be here observed, is particularly indicated when there is obstinate obstruction and formation of scabs in the nose, with redness, and swelling in the eyelids.

*Dose:* Of *Arsenicum* or *Lycopodium*, give three globules in a teaspoonful of water, night and morning—or, of *Sulphur* and *Aurum*, six globules in a tablespoonful of water, every morning the first thing (fasting)—for a week (or until the earlier manifestation of *new symptoms*, or of general improvement or change); then pause eight days, after which the course may, if necessary, be repeated as before, and so on, from time to time, until manifest improvement or change.

**DIET.**—During the inflammatory stage the diet should be sparing, and the restrictions should be more or less rigid.



## CHAPTER IX.

## DISEASES OF THE EAR.

## OTITIS INTERNA.

## INTERNAL INFLAMMATION OF THE EAR. EARACHE.

Inflammation of the inner ear is chiefly recognized by the extraordinary pain (earache) it causes. The pain is chiefly a tearing, throbbing or burning pain, is very much increased by motion, likewise by chewing, loud noise, contact of the outer parts. Inflammatory earache is one of the most distressing tortures that man can suffer. The excruciating character of this pain accounts for the cerebral irritation which is almost always present in this disease. The fever is very violent, and the pulse is hurried and small. The head glows, whereas the extremities are cold as ice; delirium and fainting fits set in, before the brain can be said to sympathize with the distress. The outer ear usually shows signs of inflammation; the passage into the ear is sometimes entirely closed, red and very sensitive, and the swelling spreads to the outer ear and the surrounding soft parts. Otitis is very apt to result in suppuration, and is still more inclined to spread to the brain. It is not certain whether the invasion of the brain takes place more easily when the inflammatory process has reached its height, or after the pus has begun to form. Suppuration supervenes but too frequently during the course of a chronic affection of the bones; hence suppuration of a bone near the ear, may involve the brain and lead to a fatal termination, even after all danger consequent upon inflammation seems to be entirely removed. Otitis may be complicated with a meningitis which runs a very rapid course, and is one of the most dangerous diseases. Its treatment has already been indicated in a former chapter. Otitis may terminate in favorable cases in complete recovery; this result, however, is rare; generally a disturbance of the functions of the ear remain behind, sometimes assuming the form of perfect deafness. If pus forms, it is fortunate if it is discharged externally, even if the tympanum (ear drum) should be greatly injured and chronic otorrhœa (discharge from the ear) should be the result.

The causes of otitis cannot be mentioned with positive certainty. A cold; and suppressed or receding skin diseases, are among the prominent ones; syphilis and scrofula are other causes.

## OTITIS EXTERNA.

As we remarked above, an inflammation of the external meatus usually accompanies an inflammation of the internal ear, and by its presence, always reveals the existence of a higher grade of otitis internal. As an idiopathic affection, disposed, however, to extend to the inner parts of the ear, it is either an inflammation of the cellular tissue in the external passage, spreading uniformly all around, very painful, but not very dangerous and of short duration, or else it consists in suppuration of one or

more glands of the outer passage. In such a case a small abscess is seen on one or the other side, more or less deeply in the inner ear. In this form of the inflammation the pain is likewise comparatively very acute, but usually ceases all at once, when at its height, by the bursting of the abscess. This inflammation very frequently accompanies, as a complicating disorder, an inflammation of the parotid gland or of other adjoining parts. Erysipelas likewise does not unfrequently attack the outer ear, and, if it begins at the ear itself, may lead to errors in diagnosis.

### OTORRHOEA.

**DISCHARGE FROM THE EAR.** As a consequence of otitis, but sometimes from other causes, we frequently meet with a discharge from the ears, which is at times slimy, at others purulent or ichorous, at others again watery or bloody. The slimy discharge is of a catarrhal nature, makes its appearance in the cases of many children, whenever they are attacked with a severe cold, and has no special significance. As a general rule, it very soon yields to a few doses of *Pulsatilla*. The other forms of otorrhœa are symptomatic manifestations of otitis, and require the same treatment as this disease. Injections of lukewarm water have always a good effect, and should never be omitted.

### DEAFNESS.

Hardness of hearing may depend upon a variety of causes, by the peculiar nature of which its curability is determined. If it proceeds directly from the auditory nerve, and is the commencement of complete deafness, it is not likely that much can be done for it by internal treatment. If the deafness is caused by a stoppage of the meatus externus, various obstacles may prevent the free entrance of sound. The most common obstacle is the accumulation of indurated cerumen in front of the tympanum. This is most effectually removed by continued injections of lukewarm water, until the plug is loosened, after which it can readily be grasped with a pair of pincers and drawn out. If an unopened abscess is the cause, which is not often the case, its reabsorption is easily accomplished by frequently dropping lukewarm water into the ear, which has to be retained in it for some time. A polypus in the passage may, if possible, be twisted or cut off; where this is not possible, the polypus can gradually be caused to shrink, by touching it frequently with the half diluted tincture of Thuya. If the tympanum (drum of the ear) is injured, a cure is, of course, impossible; in such case the patients hear often much better by inserting a loose plug of cotton in the ear. This custom is so common with many people, that they are never seen without cotton in their ears. It is a bad habit, which favors more than any other proceeding the formation of little plugs of ear-wax; for, the nuclei of most plugs, which we have removed in large numbers, were found to consist of cotton-fibres. Still more hurtful is the habit of introducing medicinal substances into the ear. We are acquainted with a lady who has been using Camphor in this manner until her tympanum has become perforated in consequence. If little children are hard of hearing, we must ascertain in every case, whether they have not inserted something like a bean, pea, millet seed, radish seed, or like articles into their ears.

## ALLOPATHIC TREATMENT.

THE EXTERNAL CANAL (meatus) OF THE EAR sometimes becomes obstructed by the natural secretion of the canal, owing to some accidental cause. Sometimes foreign particles add to the accumulation. These are best removed by thorough syringing with an *ear-syringe* with a warm solution of cooking soda.

Before attempting to syringe the ear, the plug sometimes will require previous moistening with a few drops of glycerine. A preternatural dryness of the canal of the ear sometimes exists, which is easily relieved by a small quantity of glycerine carried into the canal occasionally by a camel's hair brush.

It is not unfrequently necessary for the surgeon to have to resort to the use of the ear scoop and forceps for the removal. If, after the removal of these obstructions, there is intense and painful sensibility to sounds, a pledget of cotton, moistened with glycerine, may be laid in the external ear, and retained in place with a bandage or handkerchief.

Chronic eczema (salt rheum) of the ear, generally depends upon some vice of the system, which may be removed by the use of the following tonic, viz.: Take of Citrate of Iron Quinine a dram and a half; Fowler's Solution a dram and a half; Simple Syrup four ounces. Mix. Give a teaspoonful three times a day.

The ear should be syringed out, twice a day, with a warm solution of Super Carbonate (baking) Soda, and, after each cleansing, the following application made by carrying it within the canal of the ear with a camel's hair brush: Take of Tannin a dram; of Oxide of Zinc two drams; of Glycerine one ounce. Mix. Shake the vial, and apply with a camel's hair brush or feather.

INFLAMMATION OF THE EXTERNAL CANAL (*external otitis*) occurs most frequently in childhood, from exposure to cold, or other causes. The inflammation extends from the outer covering of the drum to the bony lining of the auditory canal. The danger, aside from the immediate pain, is, that the disease may lead to perforation of the drum, and the possibility of necrosis (death, and exfoliation of bone). In a few cases, the inflammation has been conveyed through the bony wall to the membranes of the brain, causing death. As a means of relieving pain, the canal may be filled with a solution of Morphine four grains, and Atropine two grains, in half an ounce of Glycerine, applying at the same time, over the ear, several thicknesses of flannel saturated with hot water. Laudanum may be used instead of Morphine, but it is not so effectual. If this does not procure relief, the inflammation is deeply seated, and may eventuate in necrosis, if not relieved. Such cases should be in the hands of a surgeon. It is probable that the most, or only, effectual treatment is, to cut down to the bone through the whole length of the auditory canal. Usually, the inflammation subsides in two or three days, superseded by a more or less profuse discharge. This is called (*otorrhœa*). Otorrhœa (discharge from the ear) is a symptom, or consequent, of many affections of the ear; but from whatever cause, it requires in itself about the same treatment—the frequent use of the syringe. Warm water should be used, and should, generally, be rendered slightly alkaline with a little

soda. If the discharge does not soon disappear, astringent washes should be used. A dram of Tannin, in an ounce of Glycerine, will frequently prove effectual. The Tannin may be added in much larger quantity. It can be applied with a camel's hair brush, or a feather.

A solution of Sulphate of Zinc, or Alum in water, may be used instead. After using one of these, time should be given for it to take effect, and then moisten the ear with a very little Glycerine.

In all cases of discharge from the ear, not dependant on evident inflammation of the canal, or previous inflammation of the internal ear, examination should be made for disease of the mastoid cells (in the eminence behind the ears called the mastoid process), which may require incision, and, perhaps, trephining (boring into them.)

Internal Otitis (inflammation of the middle and internal ear) is very serious, the pain is deep-seated and intolerable, attended with throbbing, confusion of the head, and fever. The inflammation is probably advancing to suppuration, possible disease of the internal ear, and permanent deafness. The drum of the ear should be closely watched by frequent examination with the speculum, and as soon as matter has formed, as shown by the altered color and form of the drum, the drum should be punctured by the surgeon and the pus let out.

In this way the patient is spared much pain not only, but more serious damage, from the drum breaking down beyond repair; and the chances are also better for recovery without disruption of the internal ear. The throat is almost always inflamed. This should be met by appropriate treatment. Mustard plaster to the neck, or rubbing the neck with turpentine or hartshorn liniment, and astringent gargles of Sulphate of Zinc, a scruple to a teacup of water, or the application of Tannin in Glycerine (one dram to the ounce) with a linen mop, or such other suitable treatment as a physician would direct. The Eustachian tube should be inflated. This can be done, if a physician is not in attendance, by closing the mouth and nose, and making forcible expulsion of the breath simultaneous with the act of swallowing. External applications will be the same as directed for external otitis.

OTALGIA (*or Neuralgia of the ear*) uncomplicated with inflammation, is, I believe, very rare. It may be connected with some irritation of the mouth, as a decayed molar (double) tooth, or it may be due to some irritation of the stomach, or some other organ supplied by the pneumo-gastric nerve. In these cases the trouble is reflex and its treatment consists in the removal of the offending cause. If no such cause is discoverable, and especially if the pain is intermittent or periodical, such general treatment should be resorted to as is recommended in the article on neuralgia. Some relief may be given by applying over the ear, warm poultices of hops or poppy heads, or by pouring into the ear a few drops of laudanum, tincture of aconite, or belladonna, or the three may be mixed and diluted with a little glycerine. The local means for the relief of pain directed for external otitis are effectual here. Not unfrequently is the administration of an anodyne necessary.

So often is earache caused by inflammation and the production of pus or mucus, that I believe always the drum ought to be thoroughly examined with the ear speculum, and, if indications of either are present, the



drum ought to be punctured by the surgeon, and relief will follow the escape of the matter.

DEAFNESS.—Some of the causes of deafness which may be removed by domestic hand, are the following:

A dried accumulation of the natural secretions of the canal of the ear, (meatus) may prevent the vibrations of sound reaching the tympanum (drum). This obstruction may be rendered still more complete, by wool or cotton with which the person negligently stops his ears, neglecting to practice proper cleanliness. This obstruction is easily discovered. Its removal is best effected by thorough washing with warm water with a hard rubber ear syringe. A common four ounce, hard rubber syringe, may be used, taking the precautions to wind the nozzle with muslin until it is too large to penetrate the canal, except just at the point. A tin cup, with one side flattened, should be held under the ear, to catch the outflow of water. The injections should be continued at one or repeated sittings, until the canal is clean, and the passage to the drum is unobstructed. When the accumulation is unusually hard, it may be softened by moistening with glycerine or bland oil.

A *deficiency of secretion* in the canal may be partly overcome by moistening it with glycerine, or sweet, or almond oil, until the natural secretion returns. This may be hastened by very warm water injections and the application of essential oils, as turpentine. They may require diluting with glycerine, or sweet oil to prevent too much irritation.

*Thickening of the lining membrane of the meatus* may cause deafness, the result of chronic inflammation. It may be overcome by applying a mixture of tincture of iodine with glycerine and tannin. Take of Tannin, one dram dissolve, in half an ounce of Glycerine, then add half an ounce of Tincture of Iodine, apply twice a day with a camel's hair brush, or a leather. Attention to the general health is required, by the use of tonics as recommended in Eczema of the ear.

Other causes of deafness require the attention of experts.

## HOMEOPATHIC TREATMENT.

### INFLAMMATION OF THE EARS.

ACONITUM is required in commencing treatment when the affection is attended with considerable febrile disturbance,—dry heat of the skin, with fullness and quickness of pulse.

*Dose:* Of a solution of six globules to two tablespoonful of water, give a teaspoonful every two hours, until the indicative symptoms subside.

BELLADONNA is indicated when there is *determination of blood to the head*, with redness of the face, by digging, boring, tearing or shooting pains extending to the throat; fever, and extreme sensibility to the slightest noise; when the pains are more severe internally; also when the brain partakes of the inflammation, and delirium is present. Also in *external inflammation of the ears*, when the inflammation runs high, and threatens to extend to the face and scalp.

*Dose:* Six globules, as directed for *Aconitum*.

HEPAR SULPHURIS should be administered twelve hours after the last dose of *Bolladonna*, if, after the second day from the commencement of treatment, the pain and inflammation be not completely reduced; or, again, and more especially in cases in which suppuration and discharge have taken place.

*Dose:* Three globules in a teaspoonful of water, repeated at intervals of twelve hours, until decided and permanent improvement or change.

SULPHUR. This medicine should be administered twelve hours after the last dose of *Hepar sulphuris*, if the discharge of matter, in particular, should continue unarrested;—or twelve hours after the fourth dose of *Mercurius*, if, in addition to the discharge of matter, there should be *humming in the ears* and pricking pains.

*Dose:* Three globules, as directed for *Hepar sulphuris*.

MERCURIUS should be selected when the following symptoms and conditions characterize the case:—Shooting or tensive pains in the ear, extending to the cheeks and teeth; sensation of coldness in the ear; increase of suffering in the warmth of the bed; inflammation and induration of the ear, with soreness of the orifice and discharge; swelling of the glands. Also, in *external inflammation*, particularly when the adjacent glands are involved.

*Dose:* Six globules, as directed for *Aconitum*.

PULSATILLA is a most valuable remedy in this affection. It is particularly indicated *when the external ear* is simultaneously much affected, and appears inflamed and swollen; attended with heat, shooting and tensive excruciating pain internally; moisture in the ear, or somewhat copious discharge. This medicine is particularly useful for females and individuals of chilly habit. Applicable, also, to most cases of *external inflammation of the ears*.

*Dose:* Six globules, as directed for *Aconitum*.

#### NERVOUS OR RHEUMATIC EARACHE.

PULSATILLA is not unfrequently indicated for the treatment of cases of nervous or rheumatic earache, which ensue, from time to time, as the consequence of antecedent inflammation; or more particularly, if there be a tendency to discharges from the ear, or if the ear be habitually moist. This is *the best* remedy for earache in *most* cases.

*Dose:* Of a solution of six globules to two table-spoonfuls of water, give a teaspoonful every half hour (when the pain is very distressing), or every three hours (in less severe cases), until a degree of improvement takes place; after which the intervals should be gradually extended to twelve hours, and the administration thus continued, until the cessation of the pain, or the occurrence of other symptoms requiring different treatment.

PHYTOLACCA should be administered when there is shooting pain in both ears, the right being worse, aggravated by swallowing; feeling as if the ears were stopped up, with crackling sounds in them; the sense of hearing seems dull, while it is really more acute.

*Dose:* A solution of six globules, as directed for *Aconitum*.

NUX VOMICA is preferably indicated when the pains are of a *tearing*,

*shooting* nature, extending to the forehead, temples, and bones of the face, worse towards morning; dryness of the ear; particularly when the affection occurs in persons of a lively, choleric disposition.

*Dose:* Of a solution of six globules to two table-spoonfuls of water, give a tea-spoonful every hour (when the pain is unbearably severe), or every three hours (in less distressing cases), until a degree of amelioration becomes apparent; after which the intervals should be gradually extended to twelve hours, and the administration thus continued until permanent and decided improvement or change.

DULCAMARA should be selected when the affection has arisen from a chill or wetting, and will, in many cases, prove sufficient for its removal; it is also indicated when the pains increase at night, and are attended with nausea.

*Dose:* A solution of six globules, as directed for *Nux vomica*.

MERCURIUS should be employed when the pain is attended with a sensation of coldness in the ears, and is characterized by *exacerbation* in the warmth of the bed; or, again, when there are shooting or tensive pains in the internal ear, extending to the cheeks and teeth.

*Dose:* A solution of six globules, as directed for *Nux vomica*.

CHAMOMILLA should be administered when there are *stabbing* pains in the ear, as if knives were driven into the head; great sensitiveness of noise, and even of music; extreme sensitiveness, susceptibility, and irritability.

*Dose:* A solution of six globules, as directed for *Nux vomica*.

SANGUINARIA should be exhibited when there is burning of the ears, with bright redness of the cheeks, and headache accompanying the earache; the neck feels stiff; painful sensitiveness to sudden sounds.

*Dose:* A solution of six globules, as directed for *Nux vomica*.

ARNICA is often of much service for the treatment of individuals of a nervous, excitable temperament, subject to attacks of earache provoked by trivial causes, and is, moreover, characteristically indicated when there is an excessive sensibility to noise.

*Dose:* A solution of six globules, as directed for *Nux vomica*.

CHINA is frequently suitable after *Arnica*, in cases in which the last named medicine has been productive of partial relief only, and when, moreover, the pains are *aggravated* by lying on the ear, or by contact.

*Dose:* A solution of six globules, as directed for *Nux vomica*.

SULPHUR should be administered, if the excessive sensibility to noise should constitute a predominant indication; it is especially suitable to persons subject to catarrh or tendency of the blood to the head.

*Dose:* Three globules in a tea-spoonful of water, night and morning, until permanent improvement or change.

DIET AND REGIMEN.—Patients who are subject to attacks of nervous or rheumatic earache should be very careful and moderate in the indulgence of their appetite; and the food should be simple but nourishing. Fermented and spirituous liquors, coffee and strong tea, etc., are capable of themselves of provoking an attack; and inasmuch as a tendency to

derangements of the digestive functions is very frequently to be distinguished as characterizing the predisposition to earache, it is very essential that those things should be avoided which are likely to engender irregularities of digestion, however apparently trivial. Everything which is known to operate as an exciting cause, should, as much as possible, be avoided.

#### HUMMING OR BUZZING IN THE EARS.

*Nux vomica* will be found of service in the treatment of recent cases of humming or buzzing in the ears, when this annoying affection is *most predominant* or the symptoms are *aggravated at night*.

*Dose:* Three globules in a teaspoonful of water, morning and evening, for a week; then pause a week, resuming the administration after the lapse of that time, if yet required.

*Pulsatilla* is to be preferred when *the evening* is more especially the period of *exacerbation*, and for persons of a mild character, particularly females.

*Dose:* Three globules, as directed for *Nux vomica*.

*CAUSTICUM*.—Loud vibration of all sounds, and even of the patient's own voice.

*Dose:* Three globules, as directed for *Nux vomica*.

*MERCURIUS* is more distinctly indicated when the attacks are attended with *sweating*.

*Dose:* Three globules, as directed for *Nux vomica*.

#### DISCHARGE FROM THE EAR.

*ARSENICUM* should be given when the discharge is profuse, smells very badly, and makes the adjacent parts sore; also when there is prostration and weakness.

*Dose:* Give three globules, in a teaspoonful of water, night and morning, for four days (or until the earlier development of manifest improvement or change); then pause four days, after which the course may be repeated as before, if necessary, and so on, until manifest improvement or change.

*AURUM* will be found to be useful in chronic cases, particularly after the abuse of Mercury, under old-school treatment, where the discharge is fetid, and the bones of the ear are diseased.

*Dose:* Three globules, as directed for Arsenicum.

*CALCARIA CARB.* should be administered, in chronic cases, when the discharge looks like matter, the glands of the neck are swollen, the abdomen is large, and there are other evidences of a scrofulous constitution.

*Dose:* Three globules, as directed for Arsenicum.

*CARBO VEG.* is suitable after the suppression of itch, or itch-like eruptions; the discharge is offensive, the ear is inflamed and sensitive to touch.

*Dose:* Three globules, as directed for Arsenicum.

*HEPAR SULPHURIS* may be administered when the discharge is very



profuse and mild, particularly in scrofulous persons, or when it results from acute inflammation of the internal ear.

*Dose:* Three globules, as directed for Arsenicum.

SULPHUR is indicated when the discharge consists of offensive matter, particularly if the left ear be affected; eruptions behind the ears, which itch, and bleed after scratching.

*Dose:* Three globules, as directed for Arsenicum.

MERCURIUS is indicated, if the affection be of syphilitic origin; the ears itch, the face is covered with little pimples which secrete matter.

*Dose:* Three globules, as directed for Arsenicum.

PULSATILLA will be found to be a very valuable remedy in the treatment of this troublesome affection. It is indicated when the discharge is the result of a cold (catarrhal) or follows acute inflammation of the ear. The discharge is usually thick and yellow; the ear is red and swollen, and there are stitch-like pains in it. The left ear is most commonly affected.

*Dose:* Of a solution of six globules in two table-spoonsful of water, give every three hours, if required.

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## CHAPTER X.

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### DISEASES OF THE NOSE.

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#### CORYZA, CATARRH, COLD IN THE HEAD.

Catarrh of the nasal mucous membrane is one of the most common and most frequently occurring affections.

A simple catarrh arises from a cold. Individuals who watch themselves somewhat, know very well that, if they feel chilly from exposing themselves to a current of air after being heated, they will have a catarrh within twelve hours. Severe attacks always commence with a febrile sensation, lassitude, dull headache, especially above the root of the nose. At first the nose is drier than usual, sensitive to cool air, the smell is sometimes remarkably affected; there is a tingling in the nose and a desire to sneeze. If a discharge takes place at the commencement, it is generally very tenacious, yellowish, or almost entirely watery. In most cases the adjoining parts are involved, especially the tonsils, which are slightly reddened, and where a stinging pain is experienced. The larynx is likewise affected, the speech being somewhat hoarse. A peculiar symptom is the remarkable frequency of the pulse, with which some persons become affected at the commencement of a catarrh, and the striking elevation of the temperature. Among children particularly the constitutional symptoms are much more striking than among adults; whereas the latter continue in the enjoyment of a sound sleep, children, on the

contrary, spend restless nights. Usually after the lapse of twenty-four hours a copious secretion of mucus takes place, after which the patient feels better and the constitutional symptoms disappear. Within nine days at most, the patient is completely restored to health, unless a relapse should have taken place. This very common form of catarrh scarcely requires to be treated medicinally. Cases may, however, occur, where the secretion remains copious and watery for three or four days, the patient feeling very much indisposed and very anxious to be freed from his complaint. Moreover, in the course of the catarrh, relapses may take place in consequence of which the febrile exacerbations may increase to such an extent that a catarrh, which was at first quite unimportant, becomes a real torture.

Under favorable circumstances, especially if the patient exposes himself to frequent relapses, or is otherwise constitutionally predisposed to the complaint, the acute form passes into the chronic. Generally the chronic form consists in a profuse secretion of mucus, without any other trouble. Frequently, however, the profuse mucus secretion is accompanied by swelling of the mucous membrane and impeded respiration. After a number of relapses the swelling increases to such a degree, that breathing through the nose becomes impossible, which gives rise to a number of ailments: the speech has a nasal twang, the throat hurts in consequence of the dryness induced by breathing exclusively with the mouth open, and sleep is variously disturbed. These difficulties remain even after the mucous secretion has entirely ceased; in that case they are even more unbearable than before. If there is a peculiar predisposition, such as scrofulosis, the internal parts of the nose become inflamed side by side with the catarrhal irritation, and an ulcerative process sets in, which secretes a foul-smelling purulent matter, (*ozæna*.) A bad smell from the nose may, however, take place, without any ulceration. (See page 48.) The structural changes in the mucous membrane frequently give rise to fungoid growths, polypus, etc.

The chronic form of Catarrh is, under all circumstances, a very obstinate complaint; probably because patients don't take care of themselves, and the swelling of the nasal membrane is constantly increased by new relapses. The more the swelling increases, the more difficult it is to cure the complaint. The best remedies for relief and eradication, are in the order in which their names here appear. *Sephia*, *Mercurius*, *Sulphur*, *Iodine*, *Calcaria Carb*, and *Aurum*.

HOME REMEDIES. In view of the obstinacy of chronic catarrh and of the bad consequence it may entail, among which loss of smell is one of the most important, it is certainly advisable to devise a course of treatment that shall prevent relapses. One of the most useful means to accomplish this result, is a gradual hardening of the whole body by means of cold water. Cold water is altogether an important remedy, in the treatment of catarrh. When drunk at the outset of an acute attack, in considerable quantity, it very soon moderates the most disagreeable sensations; and, in the chronic form, it renders good service when drawn up into the nose several times during the day. This last-mentioned use of water likewise acts as an excellent prophylactic. For catarrh, properly speaking, it is better to draw up tepid instead of cold water; tepid water loosens the tough

mucus better than cold. In the chronic form, likewise, cold water is often much less suitable than warm water, which feels much more pleasant. That it has a favorable effect upon existing ulcers, is evident were it only by cleansing the suppurating surface and preventing the formation of crusts. It is well known that copious draughts of some lukewarm beverage are likewise recommended for catarrh; it is undeniable that it has an excellent effect in catarrhal conditions of the respiratory organs. This management, however, seems so annoying to many persons, that only a few are willing to take this trouble. Of much more importance is the use of water in the epidemic catarrh of the respiratory organs; we shall revert to its use when treating of this disease. An ordinary proceeding in domestic practice is to excite a profuse perspiration. It is undeniable that this proceeding moderates the course of a catarrh, almost without an exception. Nevertheless serious doubts may be entertained against such a course. In the first place, sweat is sought to be excited by medicinal herbs. This conduct is decidedly reprehensible, for the reason that the organism should never be drenched with medicinal decoctions without the most urgent necessity. And, in the second place, the skin is rendered more susceptible to cold, which is much worse than that the first cold should remain uncured. If the skin is to be excited to increased action the best and least hurtful means to accomplish this, is a moderate vapor-bath; or, if we desire to excite perspiration in the bed, we may drink a glass of warm water with a little syrup.

#### ALLOPATHIC TREATMENT.

ACUTE CORYZA (cold in the head). But few persons go to a doctor for a simple cold in this form, but most persons usually take the case in their own hands. By the use of hot drinks and hot foot-baths he amuses himself, and in a few days the disease runs its course.

A cure can be hastened by a hot foot-bath, and by taking a full dose of Opium, as ten grains of Dover's Powder, a third of a grain of Morphia or thirty drops of Laudanum, to be followed, in the morning, by a cathartic of "salts," a Siedlitz Powder, or such other laxative as may be at hand.

Many times a cold in the head may be promptly relieved by inhaling the vapor of Iodine every three or four minutes, for an hour or so. Each inhalation should occupy a minute. The Iodine may be vaporized by merely holding a bottle of the Tincture, or Compound Tincture, in the warm hands under the nose. Greater heat increases the strength of the vapor. Pure Bromine may be inhaled in the same way with benefit. should a prolonged sitting of an hour at the inhalation of the Iodine vapor fail. I recommend inhaling into the nose the fumes of cigarettes made of white blotting paper soaked in Fowler's Solution; and, in case a cure was not effected by a night's treatment with the opiate, etc., followed by a cathartic in the morning, I would give ten drop-doses of Fowler's Solution, three times a day, for a few days.

Hot baths (air, vapor, or water), may often do good. Hot applications, as the use of very warm water, applied with a sponge, or nasal douche, are also useful.

Protection of the body from wet or cold is necessary to prevent recurrence of the attacks, which may result in *chronic* catarrh.

**TREATMENT OF CHRONIC CATARRH.**—This is both local and constitutional. The nose should be thoroughly cleansed by a warm nasal douche. This must be completely done, and to effect it, the douche must be continued as long as any of the secretion appears in the water as it flows from the nose. In the absence of a regular nasal douche an ordinary flexible syringe made to act as a siphon can be used. The tube should be wound with muslin until it closes the opening of the nostril. There is sometimes an advantage in adding a little salt, Alum, Sulphate of Zinc, a half teaspoonful, or Permanganate of Potash, a quarter of a teaspoonful, (especially if there is fetor) to the pint of water.

After a thorough cleansing the frequent inhalation of Compound Tincture of Iodine with Carbolic Acid. Take of the Compound Tincture of Iodine half an ounce, Carbolic Acid half a dram, and inhale from the bottle. The vapor is generated by the heat of the hand claspings the bottle. The same mixture diluted with an equal part of Glycerine may be applied to the lining membrane of the nose, through the nose with a camel's hair brush, twice a day. It should also be well applied to the posterior nares, through the throat, by thrusting the brush well up behind the palate. Other substances which are useful as inhalation are Bromine, which may be vaporized from the bottle by the heat of the hand, and Iodoform. The latter is vaporized by sprinkling a little of the powder on a saucer and applying heat. The vapor is conducted to the nostril by a paper or pasteboard cone prepared for the purpose.

Many other substances physicians successfully resort to with success. Nitrate of Silver, from five to twenty grains to the ounce of distilled water, and applied to the posterior nares with a brush, is one of the best. It can hardly be recommended for domestic use. The substances mentioned are thrown upon the diseased surface with steam and other atomizers and catarrhal syringes. It is hoped that the directions have been full enough to enable many to relieve themselves of a chronic catarrh which was supposed to be beyond help.

Supposing the catarrh to have been of very long standing, in addition to douches, vapors, and astringent applications attention will need to be directed to constitutional treatment. Two remedies, which do especial good in cases of habitual discharge from the mucus membrane, are Iodide of Potassium and Arsenious Acid, and if the patient is feeble, Iron should be given also, as in the following formula. Take of Iodide of Potassium five drams, dissolve in two ounces of simple syrup, and mix with a solution of a half a dram of Pyrophosphate of Iron with two ounces of simple syrup; then add two and a half drams of Fowler's Solution.

*Dose:* A teaspoonful after eating.

Other tonics may be needed to meet any existing state of the system as, if the patient should be feeble, the Citrate of Quinine and Iron in three to five grain doses three times a day, will be required to build up the appetite and strength. If this is given the iron should be omitted from the former formula. Nourishing diet is always to be given. If the patient craves sour drinks or digestion is poor, Muratic Acid in fifteen



drop doses before eating will be useful. It should be largely diluted in sweetened water and the mouth rinsed after taking.

Not unfrequently a change of air to a locality which agrees best with the general health of the patient is of the greatest advantage.

This treatment is also adapted for the extreme cases of catarrh with ulceration and offensive discharges called *Ozena*.

### HOMŒOPATHIC TREATMENT.

**CAMPHOR** (*Concentrated Tincture*). This medicine, if employed upon the earliest development of symptoms of cold in the head, will sometimes suffice to arrest the progress of the affection at once. It is particularly indicated when the premonitory stage of the complaint is characterized by *fits of shivering and headache*.

*Dose*: One drop of the concentrated tincture on a small lump of sugar, three times, at intervals of ten minutes, then twice at intervals of an hour, and lastly, twice at intervals of four hours.

**ACONITUM** may precede, or be given alternately with either of the next two remedies, when, in consequence of the swollen and congested state of the lining membrane of the nostrils, a painful sensation of fullness, heat, and smarting is experienced; and also when active febrile symptoms supervene.

*Dose*: Of a solution of six globules to four teaspoonsful of water, give a teaspoonful every three hours, until the indicative symptoms subside. If in *alternation* with *Nux-vomica*, or with any other medicine, give separately, six globules of each, so that four hours elapse between doses.

**NUX-VOMICA** is generally preferable to all other remedies in the first stage, and especially when there is dry obstruction *during the night only*, with pressive heaviness in the forehead and confusion in the head; heat in the head; heat in the face, increasing towards evening. If these sensations occur in combination with other *catarrhal* symptoms, refer to the indications afforded for the exhibition of this remedy under the heads of **HOARSENESS** and **COUGH**. This direction equally applies to the other medicines here quoted.

*Dose*: Six pills every two to six hours.

**LYCOPodium** will often be found efficacious after *Nux-vomica* in obstinate cases of stuffing of the nose, particularly at night, rendering it necessary to sleep with the mouth open, which causes a disagreeable dryness without much thirst, attended with much confusion in the head and burning pain in the forehead. This remedy is frequently more or less useful in colds in the head *of all kinds*.

*Dose*: Six globules, as directed for *Nux-vomica*.

**MERCURIUS** is indicated by profuse discharge, producing excoriation, swelling or redness of the nose, pains in the head and face. This is a valuable remedy in the generality of *ordinary cases* of cold in the head, particularly when the complaint is epidemic.

*Dose*: Two globules in a teaspoonful of water, night and morning, for four days, but if within twelve hours after the *second* dose the symptoms continue to become aggravated, notwithstanding treatment, proceed with the next remedy; or, if the nasal discharge and watering of the eyes predominate, consider *Euphrasia*.

**HEPAR-SULPHURUS** is chiefly of service when only one nostril is affected, or when there is headache which is aggravated by the slightest movement; or when the complaint is renewed on each exposure to cold air; further in most cases in which *Mercurius*, though apparently indicated, has produced little or no improvement, when it should be administered six hours after the second dose of that medicine.

*Dose:* Three globules in a teaspoonful of water, night and morning. If however, the headache continues unabated, within six hours after the second dose of *Hepar*, consider *Belladonna*.

**EUPHRASIA** should be employed six hours after the second dose of *Mercurius* in preference to *Hepar-s.*, when the discharge from the nose is excessive, and there is, at the same time, confusion of the head, with redness of the eyes and eyelids, and copious, acrid or scalding flow of tears.

*Dose:* Three globules in a teaspoonful of water, every three hours, until improvement or change.

**BELLADONNA** should be administered, if the headache continue unabated, or when it becomes associated with a sensation of heat and fullness about the head and eyes. When the sense of smelling is variously affected, being at one time too acute, and at another too dull, there will be additional reason for resorting to this remedy.

*Dose:* Six globules in a tablespoonful of water, repeated at the expiration of four hours, and again after an interval of eight hours, if the indicative symptoms be still predominant.

**NATRUM-M.** is indicated by cold in the head, renewed by the slightest chill, or exposure to a current of air; obstruction of the nose every second day.

*Dose:* Four globules in a teaspoonful of water, night and morning, for a week.

**KALI-BICHROM.** is indicated by *swelling of the nose and nostrils, with copious watery secretion*, and diminished sense of smell.

*Dose:* Four globules in a teaspoonful of water, night and morning, until amelioration or change.

**ARSENICUM** is indicated by *obstruction of the nose*, with, at the same time, discharge of a thin, acrid, excoriating phlegm, and burning heat in the nostrils, etc. *Suffering relieved by heat*; pain in the back; feeling of general debility, or prostration of strength.

*Dose:* Two globules in a teaspoonful of water, every three hours, until amelioration or change; but if only partial relief ensue within three hours after the fourth dose, pause three hours more, and proceed with the next remedy.

**DULCAMARA** should be given, if, after the previous administration of the two preceding remedies, fresh obstruction is provoked by the slightest exposure to air.

*Dose:* Three globules in a teaspoonful of water, night and morning, until permanent amelioration or change.

**PULSATILLA** is indicated when the nasal discharge is thick, fetid, greenish-yellow, or mixed with clots of blood; loss of taste and smell, headaches, sneezing, chill, especially towards evening; disposition to weep, lowness of spirits, heaviness or confusion of the head in a warm room.

*Dose*; Three globules in a teaspoonful of water, night and morning, for four successive days.

CHAMOMILLA should be selected when the affection has arisen from checked perspiration, and there is an acrid discharge from the nose, causing redness of the nostrils, and excoriation or soreness under the nose; chapped lips; *shivering with thirst*.

*Dose*; Of a solution of six globules to four tablespoonsful of water, give a tablespoonful every three hours, until amelioration or change.

AMMONIUM-CARB. is often of service in cases of cold in the head, with copious discharge, particularly of an acrimonious, burning, watery fluid; hoarseness, tickling, suffocating cough, with alternate heats and chills; or stuffed nose, especially at night; swelling and painful sensibility of the nostrils; *dryness of the nose*.

*Dose*; Three globules in a teaspoonful of water, every four hours, until amelioration or change.

#### DIFFICULTY OF BREATHING.

IPECACUANHA should usually be selected instead of *Aconitum* and the successive remedies, when the sudden suppression of cold in the head is followed by difficulty of breathing.

*Dose*; Three globules in a teaspoonful of water, every three hours. If, however, within two hours after the third dose, there be no decided relief, pause four hours longer, and proceed with the next medicine.

BRYONIA should be administered six hours after the third dose of *Ipecacuanha*, if the employment of the latter medicine has been followed by inadequate relief, and the difficulty of breathing still continues painfully predominant.

*Dose*; Three globules as directed for *Ipecacuanha*. If, however, there be no positive relief within two hours after the second dose of *Bryonia*, pause four hours longer, and proceed with the next medicine.

SULPHUR should be administered six hours after the second dose of *Bryonia*, in cases in which the second dose of the last named medicine has been productive of inadequate benefit.

*Dose*: Four globules in a teaspoonful of water, morning and evening, for three days.

#### CONSTITUTIONAL SUSCEPTIBILITY TO COLD IN THE HEAD.

CALCAREA is very generally of service in overcoming the extreme susceptibility to cold, which distinguishes some constitutions. This remedy is, moreover, especially indicated when the attacks of cold in the head of infants, at the period of teething, occur, accompanied by oppressive breathing. In general, also, Calcarea is of service when attacks are liable to be provoked by every change of weather.

*Dose*: Two globules in a teaspoonful of water, at bed time, two days in succession. Repeat in one week.

SILICEA should be employed, upon the subsidence of a repeated attack, in cases (as just stated) in which Calcarea has apparently failed to modify the predisposition.

*Dose*: Two globules, as directed for Calcarea.

**PULSATILLA** is generally of great service in the treatment of predisposition of cold, when the attacks are complicated with marked derangement of the digestive functions, especially for persons of a mild and sensitive disposition and lymphatic constitution.

*Dose:* As for *Calcarea*.

**HOME REMEDIES** may be summed up in the word *care*. A little *salt-water* drawn up the nostrils in the morning is frequently beneficial. *Permanganate of Potash*, dissolved in water (just enough to give a beautiful color), is an excellent remedy for the offensive odor from a bad catarrh.

We have to devote a few remarks to **POLYPI IN THE NOSE**. If we except the cancerous growth, there are two distinct kinds of polypi. One is a simple fungoid growth of the nasal mucous membrane, and owes its origin to chronic catarrh; the other is rather an idiopathic growth with vessels and cellular tissue. These excrescences sometimes impede respiration to such an extent, that they have to be removed either by an operation, or by medicinal treatment. That the latter is sometimes adequate to their removal has been placed beyond all question by numerous successful results. In treating a nasal polypus, we use the following remedies: *Calcarea carbonica*, in the higher attenuations, is recommended by many authorities, likewise for polypous excrescences of the Schneiderian membrane. We have never been able to obtain any good from its use in this disease. Against sarcomatous polypi we frequently find useful: *Kali bichromicum*, *Phosphorous* or *Sulphur*. The result of the treatment, however, in such cases, is much less favorable than that of mucous polypi.

#### INFLAMMATION OF THE NOSE, NASITIS.

Inflammation of the Schneiderian membrane generally occurs under the form of a more or less intense catarrh, of which it is very frequently a symptomatic manifestation. The ulcerative process to which attention has been called when treating of catarrh, depends upon this inflammation. The treatment is conducted with the same remedies that have already been indicated in the former chapter.

There is another form of nasitis where single follicles are attacked, in consequence of which abscesses form. This disorder is very painful, and it is desirable that its course should be shortened as much as possible. The best remedy for this purpose is *Mercurius*; *Hepar Sulphuris* may likewise prove useful. In some cases, if the affection is just beginning, it may be well to commence the treatment with *Belladonna*. The application of a warm fluid does the same good here as in any other abscess.

Inflammations of the nose, which constitute partial manifestations of other constitutional affections, will be spoken of in connection with the latter, where the proper treatment will likewise be explained.

A peculiar inflammation of the nasal mucous membrane, which bears the greatest resemblance to eczema of the external skin, and frequently spreads in the form of an eczematous process to the external nose and to the lips, results in a continual formation of crusts and runs a very slow course, requires for its cure *Mercurius*, *Kali bichromicum*, or in more chronic cases, *Graphites*. Inasmuch as the cure does not take place very rapidly, it is well not to change the remedy too soon.



## EPISTAXIS, BLEEDING AT THE NOSE.

Bleeding at the nose is one of the most frequent occurrences ; no organ is as easily inclined to bleed as the nose, the cause of which has to be sought in the peculiarly delicate structure of its mucous membrane, in its great vascularity, and in the circumstance that the nose is remarkably exposed to external influences and injuries.

Bleeding at the nose generally sets in unexpectedly without any precursory symptoms, which, when existing, consist of congestion about the head, such as headache, vertigo, buzzing in the ears, etc., or fever. Generally the bleeding takes place only from one nostril, and, as regards quantity, varies from a few drops, mixed with nasal mucus, to whole pounds. Sometimes it is a scarcely perceptible flow of blood, sometimes a mere dribbling of a few drops, and sometimes, but very seldom, the blood rushes out in torrents. According as the bleeding vessel is located, the blood is poured forth from the external nostrils, or else from the posterior nares into the pharynx. The latter result is apt to occur at night during sleep. On waking, the patient vomits up the blood, or, if it had run into the larynx, it is coughed up, leading both the physician and the patient to suppose that he had an attack of hæmoptysis, so much the more when the co-existing symptoms render this supposition more or less founded in fact.

The bleeding may continue from a few seconds to whole days. If the single turns follow each other in rapid succession, it may often seem as if the bleeding continued for days.

The causes are various ; but if a good deal of blood is lost, it is always desirable to investigate them with accuracy. There undoubtedly is such a thing as a constitutional predisposition to nose-bleed, in consequence of which the vessels are abnormally inclined to fill up and burst. This predisposition may even be hereditary, although it does not show itself in the looks of the individual. Besides this, a marked flow of blood to the nose, or even to the whole head, is one of the most frequent causes ; likewise mechanical impressions, ulcers of the mucous membrane, and finally a peculiar composition of the blood which favors the exudation of the blood, as in typhus, scurvy, etc. The frequent appearance of nose-bleed at a time when the barometer is very low, causes us to adopt the theory that the atmosphere exerts a peculiar pressure, resulting more particularly in the production of congestions about the head.

Although nose-bleed, as we stated above, is, generally speaking, an occurrence of trifling importance, yet, under certain circumstances, it acquires a peculiar significance. In the first place, the quantity of the blood that is lost by one or by a series of successive bleedings, may be so great that the most dangerous symptoms of anæmia (bloodlessness) may result from such a loss. In the next place, the hemorrhage is dangerous in such conditions as anæmia and typhus, which do not bear any loss of blood. It is undoubtedly wrong to view the nose-bleed in such conditions as a critical endeavor of the organism, although such a view seems justified by a momentary amelioration of single symptoms, especially the congestive head symptoms. Such an improvement is very soon followed by a so much more disagreeable aggravation. Nature thus

points out the value we are to attach to artificial bleedings, and that they at most only palliate the distress at the expense of the general organism. In little children and old people, nose-bleed is always a dangerous occurrence.

### ALLOPATHIC TREATMENT.

**HEMORRHAGE FROM THE NOSE.** The neck ties, collar or binding should be unloosened, and the neck left perfectly free. The application of cold water to the nose or back of the neck may stop the flow. Strong solutions of alum, sulphate of zinc (white vitrol), or tannin may be applied to the nostril by snuffing it from the hand, or inserting plugs in the nose, soaked with the solution. In urgent cases, if you have solution of the Per-sulphate of Iron, or the powder, it may be carried well up into the nostril with a swab, and may stop the flow by forming a clot. Powdered alum with tannin may be snuffed into the nostril dry. If a clot of blood is formed in the nose, it should be left undisturbed until it comes away of itself, for meddling with it may rekindle the bleeding. If these means fail, and a surgeon is not available, it may be necessary to plug the nostrils by domestic hands. To do this a twine, well waxed, is passed through a gumelastie catheter, and both are then passed through the nose into the mouth, by means of a hook, crotchet needle, or forceps, the twine is drawn forward and made fast to a piece of sponge or plug of cloth. By moving the catheter and drawing on the twine projecting from the nose, the plug is drawn firmly into the nares. It should not be removed for forty-eight hours. Should bleeding continue from the nose, the anterior nares may also be plugged. Gallic Acid, in doses of a scruple, with twenty drops of Aromatic Sulphuric Acid in water, may be given internally every three or four hours. Tincture of Iron, in doses of thirty drops, well diluted may be given at the same intervals, or Ergot, in doses of a teaspoonful of the powder, or fluid extract. Turpentine in doses of ten to twenty drops in mucilage or syrup, from two to four hours apart. The bowels should be kept regular, with mild laxations. The diet should be nourishing meat, potatoes, celery, and fruits.

### HOMOEOPATHIC TREATMENT.

#### INDICATIONS AFFORDED BY PARTICULAR CAUSES AND CONDITIONS.

When the discharge of blood from the nose is occasioned by local determination of blood, select especially from : \*—*Aconitum Belladonna, Crocus, Graphites, Rhus, and Hamamelis.*

When caused by being *overheated*, or over-indulgence in *fermented liquors*, select especially from : \*—*Nux vomica, Aconitum, Belladonna, and Bryonia.*

When occasioned by *loss of humors*, and other *debilitating causes*, select especially : \*—*Ferrum and China.*

When occasioned by *physical exertion*, select especially : \*—*Rhus or Arnica.*

When occasioned by a *blow* or *contusion*, select especially \*—*Arnica.*

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\* See Note on foot next page.

When readily provoked by the *slightest cause*, select especially from: \*—*Sulphur, Silicea, Sepia, Calcareo, Carbo, Graphites*, and *Lycopodium*.

When the discharge is *excessive*, select especially from: \*—*Aconitum, Arnica, Belladonna, Mercurius, Pulsatilla*, and *Rhus*.

When associated with *scanty menstruation*, select especially from: \*—*Pulsatilla, Graphites, Causticum*, and *Sepia*.

When associated with *excessive menstruation*, select especially from: \*—*Aconitum, Calcareo*, and *Crocus*.

When (in children) associated with *worms*, select especially: \*—*Mercurius* and *Cina*.

When bleeding of the nose occurs with every attack of *cold in the head* select especially: \*—*Pulsatilla*.

ACONITUM is indicated by prolonged or violent bleeding at the nose, in plethoric subjects, with a considerable degree of fever, flushing of the face, pulsation of the arteries of the temples and neck, or general fullness of the vessels of the head.

*Dose:* Of a solution of four globules to two tablespoonsful of water, give a teaspoonful every half hour, until amelioration or change.

BELLADONNA is frequently of the greatest service when there is bleeding from the nose *at night, which awakens the patient from sleep*, and sometimes returns in the morning; bleeding from the nose from being overheated.

*Dose:* Four globules, as directed for *Aconitum*.

BRYONIA is preferably indicated by bleeding from the nose, chiefly *in the morning, or at night during sleep*, causing the patient to awake; or when it arises from suppressed menstruation, or from overheating during warm weather; obstinate or irritable disposition.

*Dose:* Four globules, as directed for *Aconitum*.

MERCURIUS is of great service against bleeding of the nose *during sleep*, or while coughing, with speedy coagulation, so that the blood hangs in clots at the nostrils; or when the affection is preceded by a sensation of tightness round the head, as if it were bound.

*Dose:* Four globules, as directed for *Aconitum*.

CARBO V. is of essential service against bleeding at the nose *during the night*, with ebullition of blood; violent nasal hemorrhage in the *morning while in bed*, followed by pain in the chest; discharge of a few drops of blood from the nose every forenoon; excessive bleeding from the

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\* These indications afforded by particular causes and conditions, are not to be considered paramount. In very many cases, it will, indeed be found that the *one or other* of the medicines *thus* indicated, otherwise corresponds to the particular *symptoms present*, as described in the subsequent portions of this article, in respect of each, separately. But, if it should occur that, although indicated by such particular cause, or condition, the medicine, thus appropriate, offers *no other* relation to the case, and that one or more of the others *do* more particularly correspond, the latter should be selected. If, however, two medicines are *identically indicated* in all respects, *except* by the cause, or particular condition here named,—such cause or condition will be decisive between them, and should then determine the selection.

nose several times a day, particularly after *stooping*, or after every exertion, preceded and followed by great paleness of the face.

*Dose:* Two globules in a teaspoonful of water, morning and evening, for three days (or until the earlier development of improvement or change); then pause four days, after which the course may, if necessary, be repeated as before.

GRAPHITES may sometimes prove useful against bleeding of the nose towards night, with heat in the face, preceded by determination of blood to the head, in the after part of the day, particularly in females who have *scanty menstruation*.

*Dose:* Two globules, as directed for *Carbo v.*

PULSATILLA is indicated by discharge of blood from the nose every afternoon, evening, or before midnight, especially in females with suppressed or scanty menstruation, or in those of a mild and placid disposition.

*Dose:* Four globules, as directed for *Aconitum*.

HAMAMELIS should be administered in cases in which the blood is dark colored and flows sluggishly but profusely. It is also useful if the nose bleed be complicated with bleeding of the lungs, or if resulting from suppressed menstrual flow. One of the best remedies.

*Dose:* Four globules, as directed for *Aconitum*

VERATRUM ALB. will be found efficacious when there is present, death-like paleness of the face, coldness of the surface of the body, and slow, intermitting pulse.

*Dose:* Four globules, as directed for *Aconitum*.

ARNICA, in addition to being the principal medicine in violent nasal hemorrhage from external injury, or from great physical exertion, is, moreover, an important remedy in all cases in which the hemorrhage is preceded by itching in the nose and forehead; and when the nose feels hot, and the blood discharged is red and liquid.

*Dose:* Four globules, as directed for *Aconitum*.

RRIUS is appropriate for the treatment of bleeding of the nose occasioned by physical exertion, such as *lifting a heavy weight*, or when blowing the nose, spitting, etc.; or for discharge of blood from the nose, which becomes aggravated or renewed on *stooping, or during the night*

*Dose:* Four globules, as directed for *Aconitum*

CHINA is generally to be selected when the loss of blood has been very considerable, and when the patient is much weakened before assistance is rendered.

*Dose:* Four globules, as directed for *Aconitum*

FERRUM should be employed after the previous administration of *China*, in cases in which the last named medicine has been productive of partial amelioration only. *Ferrum* is, moreover, of much service in the treatment of bleeding of the nose occurring in debilitated subjects, with excessive paleness of the face.

*Dose:* Two globules, as directed for *Carbo v*



**SEPIA.**—Frequent attacks of hemorrhage from the nose, with pale or sallow complexion, especially in females with obstructed menstruation.

*Dose:* Two globules, as directed for Carbo v.

**NUX v.** is more particularly indicated by bleeding of the nose, especially in the *morning*, from being overheated, or from the suppression of an accustomed discharge, such as that of piles; also after drinking wine, etc., or in habitual drunkards.

*Dose:* Four globules, as directed for Aconitum.

**CROCUS** is useful for discharge of dark-colored, thick, or viscous blood from the nose, the blood hangs in long black strings; particularly in females who menstruate too copiously, sometimes followed by fainting.

*Dose:* Four globules, as directed for Aconitum.

**MOSCHUS** is frequently serviceable when the bleeding of the nose occurs in nervous, hysterical females, or when the bleeding has continued to depletion, and there is spasmodic jerking of the muscles.

*Dose:* Four globules, as directed for Aconitum.

**SILICEA** is an excellent remedy for the treatment of those obstinate and sometimes habitual discharges of blood from the nose, which occur in persons of a marked scrofulous habit of body.

*Dose.* Two globules, as directed for Carbo v.

#### HOME REMEDIES.

When the hemorrhage is of an active kind, the patient should be placed in the erect posture, and kept cool and quiet for some time afterwards.

When there is reason to fear suffocation from the bleeding continuing inwardly, and getting into the throat, as is liable to happen in extremely debilitated subjects, in whom little or no reaction appears to follow the administration of the remedies, the anterior and posterior outlets from the nose may be plugged; the latter by passing threads up the nostrils, and bringing them out at the mouth, then securing pieces of sponge, or small rolls of lint, to the ends; after this the threads should be drawn back, and tied sufficiently tight so as to bring the plugs somewhat firmly against the orifices.

Cold water, ice, snow, or cold or cooling articles applied to the head and neck are beneficial when the bleeding is *evidently* caused by excessive flow of blood to the head.

In treating this disorder, as a matter of course, the exciting causes are of great importance. Where the symptoms of violent congestion of the head are present, the remedies which we have recommended for cerebral hyperemia, particularly *Belladonna*, *Aconite*, *Nux vomica*, (also *Gelsemium*, and *Veratrum viride*), are especially to be kept in view. At the commencement of a general acute disease, *Bryonia alba* is the best remedy; but it is not here alone that it is useful, but likewise in the bleedings depending upon strongly marked venous hyperaemia of the brain, and belonging rather in the category of passive hemorrhages. If such bleedings set in without any other accessory symptoms or fever, we give *Crocus*

and *China*, the last-named, more particularly, where distinct symptoms of anaemia were always present previous to the hemorrhage. In the subsequent course of acute affections, with decomposition of the blood, *Arsenicum*, *Lachesis* and *Secale cornutum* are mostly to be commended. Hartmann has seen *Moschus* act with quick success in cases where jaetitation of the muscles had already set in in consequence of the loss of blood.

DIET AND REGIMEN.—In all cases in which bleeding of the nose occurs otherwise than as the result of a mere casual accident (and *even then* until the discharge is thoroughly subdued), the diet should be plain and unstimulating; it should, nevertheless, be nourishing, for—although, in many cases, as this discharge occurs in the place of some other natural evacuation, the system is not so much exhausted thereby as might be anticipated—it may still be looked upon as an indication of some local or general debility. The state of the organs of digestion should therefore be subjected to close attention, that any irregularities may be obviated, and that proper nutrition may be promoted. Regular habits, early hours, avoidance of over-intense application, extremes of temperature, or of excesses of any kind, a fair proportion of exercise in the open air, in favorable weather (but without enduring fatigue), and the like, are essential.

In cases of *very debilitating* and long-continued discharges of blood from the nose, change of air and scene will often materially assist in the restoration of the patient.

## Part Fourth.

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### CHAPTER XI.

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#### DISEASES OF THE MOUTH AND THROAT.

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##### STOMATITIS.

###### INFLAMMATION OF THE MOUTH. CANKER OF THE MOUTH.

We comprehend under this name all the catarrhal affections of the mouth and fauces, from simple hyperæmia to the formation of erosions, aphthæ.

Generally speaking it is a mere symptom of some more general disease. In a few cases it is an independent disease, with a tendency to run a chronic course, and torment the patient to such a degree that it becomes necessary to proceed against it. In such cases, we find certain places of the mucous membrane, most frequently the arch of the palate and the under side of the tongue, covered with spots of various sizes, of a uniform bright, and very seldom of a dark, redness, causing a feeling of intense burning, impeding mastication, and frequently disappearing very suddenly in order to break out again in some other part, and running altogether a very obstinate course.

A catarrhal affection of the mouth and fauces accompanies the most diversified diseases of the digestive apparatus, as well as of the organs adjoining the mouth, and acquires importance not so much from its inherent dignity as from the fact that by it we determine the condition of other organs. The coating of the tongue, for instance, which depends upon the degree and form of stomatitis, is, undoubtedly, an important diagnostic sign. The main symptoms of catarrh of the mouth are painfulness, which is particularly prominent in the case of little children, altered taste, secretion of a greater or less quantity of tenacious mucus, attended with diminished secretion of saliva, fetid smell from the mouth, sometimes frontal headache. The chronic form of catarrhal stomatitis is likewise characterized by an unusual secretion of mucus, altered taste and bad smell from the mouth, which is even perceptible to the patient. Of more importance is the chronic form of catarrh of the fauces, which is a source of great annoyance. It is generally met with among singers, smokers, drinkers, and is, likewise, one of the remote consequences of syphilis. If the affection springs from the last-mentioned cause, it fills the patients with great anxiety, because they are in constant dread of a syphilitic affection in the mouth. It is generally confined to the posterior wall of the pharynx; the tonsils, however, are frequently involved in the morbid process. The affected part shows a somewhat deeper redness, is

traversed with distinctly injected, varicose vessels, is more or less swollen, sometimes exhibiting granulations, and at times streaks of swelling, so that the mucous membrane seems divided in regular parallel puffy elevations, between and on top of which streaks of a very tenacious, yellow mucus are seen. This secretion of tenacious mucus is the greatest torture to the patients, for the affection is not painful of itself, but only becomes so when, by the constant efforts made to hawk up the mucus, the mucous membrane of the fauces becomes irritated. This trouble is always very obstinate.

By aphthæ we understand a peculiar disorganization of the mucus lining of the mouth. Aphthæ generally sets in with the symptoms of acute catarrh of the mouth, seldom without premonitory symptoms, having the appearance of small, watery or whitish blisters on the lips, tongue or cheeks, surrounded by a narrow, red areola. They soon break, leaving small ulcerations of the skin, with a yellow or yellow-gray base, and a vividly red, sharply circumscribed border. With the outbreak of the blisters, the fever often disappears, and only continues, if the eruption, instead of breaking out all at once, makes its appearance in a successive series of crops. The single little ulcer usually heals very rapidly, and it is only under very unfavorable circumstances that more deeply-penetrating ulcerations and diphtheritic membranous formations take the place of the simple aphthæ.

Stomatitis proper, that is, inflammation of the mucus lining of the mouth, commences with the symptoms of a violent, more or less extensive hyperæmia, from which, however, it soon differs by the greater swelling of the more especially affected parts, particularly the gums. Every part of the mouth is very painful, not even the softest nourishment can be taken without intense pain; if infants are the victims of this disorder, they refuse the breast very obstinately. In the further course of the disease, the gums look dark-red, with whitish streaks, but, at any rate at the beginning, without any loss of substance. There is no increased secretion of mucus, but profuse pyalism, with metallic taste and disagreeable odor of the breath. Fever is always present, sometimes to a high degree, and attended with the most threatening cerebral symptoms. After a while the digestion becomes impaired, the deficient nutrition leads to a loss of strength, which is still increased by the fact that the sleep is usually very much disturbed. In the higher grades of the inflammation the salivary glands are always very much inflamed, swollen and painful.

This disorder scarcely ever runs a rapid course; it lasts at least seven days, and may become very much protracted by secondary ulcerations and inflammation of the salivary glands. In this way, the lives of little children may be placed in jeopardy, or by an extraordinary increase of the cerebral irritation and the appearance of convulsions.

The morbid processes of the mucus membrane of the mouth which we have enumerated so far, occur much more frequently and break out much more readily in the organisms of children than in those of adults. Whether this is owing to the greater delicacy of the infantile mucous membrane, or to deficient nutrition, is not very clear. Most diseases of this class, among infants at any rate, undeniably arise from the circum-



stance that the mouth is not kept sufficiently clean; whereas on the other hand, stomatitis often attacks children where the utmost cleanliness is observed. One great cause of the disease, is the pernicious habit of giving children the breast much too frequently; not only is the proper digestion interfered with by this pernicious habit, but the mouth cannot be kept clean when it is continually lined with milk. A mother cannot be too careful in this respect; a slight derangement in the functions of the mouth is sometimes sufficient to interfere with the assimilative process, and to bring on a condition of things that must inevitably lead to the deterioration of the infantile organism.

TREATMENT.—We have placed these apparently different, and yet in many respects homogeneous diseases together, because the remedies which they require are generally the same, and unnecessary repetitions are thus avoided.

### ALLOPATHIC TREATMENT.

THE TREATMENT OF STOMATITIS is not, as a rule, very complicated. In follicular sore mouth and the aphtous sore mouth of children (thrush) a mouth wash of two drams of Chlorate of Potash, half a dram to a dram of Carbolic Acid, to eight ounces of water, is generally efficacious. The borax and honey of domestic practice, or preferably borax and glycerine, (two drams to the ounce) applied with a camel's hair brush or pencil, is also generally effectual. Or a weak solution of Sulphate of Zinc (white vitriol) or Alum will generally effect a cure.

In *ulcerative sore mouth* (Canker) Chlorate of Potash is almost a specific. It should be finely pulverized and mixed with an equal part of pulverized sugar. The powder should be sprinkled on the ulcerated surface. Alum makes a servicable application by touching each ulcer with the crystal. Other astringent applications are useful as, Sulphate of Zinc (White Vitriol), Sulphate of Copper (Blue Vitriol), Nitrate of Silver (Lunar Caustic), touching each ulcer with the dry salt, or Tannin sprinkled dry upon the surface of the ulcer.

In infants there is probably no better treatment than the Chlorate of Potash. The powdered salt may also be given internally to children in doses of five grains in sugar and water.

When these painful ulcers occur periodically, the ulcers may be touched with Muriatic Acid and applied by means of a pine stick. In case there is any derangement of the stomach in these latter cases, the internal use of the Dilute Muriatic or Nitro-Muriatic acid, in doses of fifteen drops well diluted in sweetened water, three times a day, is often extremely beneficial.

The general health will need attention, poor digestion assisted by Pepsin alone or with Bismuth. The ordinary dose of each is five grains. Impoverished blood calls for bitter infusions of Peruvian Bark and Iron. The bitter infusions are made by macerating a dram of the crude drug in a pint of water—the dose, a wineglassful. The Citrate of Iron and Quinine in doses of three to five grains generally fills all the indications.

In *nursing sore mouth* the above treatment is applicable, but the chief object is to support the system so that the waste will be supplied. The

diet should consist of meat, eggs, milk, cream, oat meal, graham, etc. The Citrate of Iron and Quinine and Syrup of the Hypophosphites will be materially beneficial.

### HOMEOPATHIC TREATMENT.

**BELLADONNA.**—We can safely say, that in all cases where the lining membrane of the mouth becomes *red* and inflamed, without the appearance of little blisters, or sores, *Bell.* is the best remedy. It acts most powerfully on the organism of children, while they are most liable to these inflammations. It is most appropriate in the commencement of the attack; the higher the constitutional symptoms run, the more appropriate this remedy becomes. In chronic catarrh, or inflammation of the mouth, it is of very little use.

*Dose:* Six pills in three tablespoonsful of water, of which solution, take a teaspoonful every one to four hours, as the case is more or less urgent.

**MURCURIOUS.**—Is a specific in cases where there are little blisters, or sores (aphthæ), as *Bell.* is where there are none. It is suited to every grade of the disorder, even to ulcerations of the mucous lining.

*Dose:* As for *Belladonna*.

**BORAX** Is not suited to this disease as well as to **THRUSH**, which see.

Other remedies are *Nux v.*, *Dulcamara*, and *Nitric Acid*. The latter, for that form of the disease, which is the result of the use of Calomel, or Mercury, in too large doses.

**HOME REMEDIES.** Precautions in diet, are particularly important in cases of children, and infants. A frequent cleansing of the mouth, has a palliative and curative effect, not only in the case of children, but in that of adults. Warm water is the best means to cleanse the mouth with. The use of fat food must be strictly forbidden; after eating fat food, every symptom of the disease becomes aggravated. Cooling washes are usually to be recommended.

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## ANGINA.

### SORE THROAT. APHTHOUS SORE THROAT.

By this name we understand an inflammatory affection of the posterior parts of the mouth and pharynx. According as it consists only in a catarrhal irritation of the mucous lining or in actual inflammation of the parts, it is divided into catarrhal and tonsillary angina, which are two distinct forms of the disease.

Catarrhal Angina is synonymous with acute catarrh of the pharynx and the posterior buccal cavity. The disease usually arises as independent of other affections, less frequently in the course of other catarrhal processes. Its most common cause is a cold; it likewise breaks out as a symptom of scarlatina, less frequently as a symptom of typhus, and sometimes it seems to spread even epidemically. Many individuals have from their youth a peculiar disposition to catarrhal angina, without showing in their external appearance any signs of a peculiar irritability or

weakness; on the contrary, they are persons of healthy-looking and vigorous constitutions.

**SYMPTOMS.**—These vary according as children or adults are affected. In either case the disease usually breaks out suddenly without any premonitory symptoms. The children were quite cheerful the moment previous, and are suddenly attacked with all the symptoms of a very violent fever and marked cerebral congestion. The temperature of the skin is very high, the pulse disproportionately accelerated, that is, in comparison with the trifling importance of the pathological process; the children want to lie down, and they sink into a soporose condition from which they are frequently roused by sudden exclamations or anxious fancies, which sometimes continue even after the patients are wide awake, so that they seem really delirious. All these symptoms are worse towards evening and attain their climax about midnight, after which they decrease in intensity. The cerebral symptoms are so intense and, by their form and violence, cause so much anxiety, that it would seem at first sight as though the little patients were attacked with inflammation of the brain; there is but one *certain diagnostic sign*, which is the copious SWEAT that is scarcely ever wanting in this disease, and which always breaks out, if the patients are covered ever so little, sometimes even if they are not covered at all, and which is never wanting if the patients are sleeping. The appearance of the tongue may be perfectly natural; generally, however, it shows a thin, whitish coating at an early stage of the disease. The pupils are at times dilated, at times contracted. If the children are old enough to describe their morbid feelings, they complain much less frequently of pain in the throat than of pain in the pit of the stomach and in the ears. The pain in the latter may increase to a high degree of intensity, and may cause the patients to moan all the time. The apparently threatening intensity of these symptoms in the evening or at night bears no proportion to their striking decrease in the morning, when the children are seen playing about very cheerfully, and perhaps, feeling a little more tired than usual. If left to itself the disease does not terminate here, but soon after dinner a fever sets in, which, however, does not attain the same degree of intensity that the fever had at the first outbreak, and ceases on the third, sometimes not till the seventh day. The appetite is very bad, the bowels constipated, thirst moderate. There is very frequently a peculiar odor from the mouth, which is not so much a foul smell, as rather like that of Phosphorus; and is always more marked in the more violent cases, perhaps because in such cases the stomach is generally very seriously involved.

Catarrhal Angina is undoubtedly one of the most common causes of the cerebral congestions with which children are so often attacked, and is but too seldom recognized as their exciting cause. The above-mentioned diagnostic sign has never left us in the lurch, and we deem it so much more important as it is difficult, especially in the case of little children, to undertake an inspection of the throat. In children of six or seven years, marked cerebral congestions do not usually accompany this form of angina, which runs the same course, in their case, as in the case of adults.

Among older individuals catarrhal angina generally sets in without any decided fever symptoms; if they are present, they correspond to the febrile stage of every catarrhal fever; that is to say, they consist of alternate attacks of chills and heat, great lassitude, and rheumatic drawing and tearing in the extremities. At the same time they complain of disagreeable dryness in the throat, and painful deglutition (swallowing), especially of the saliva, which is generally very tenacious, and secreted in small quantities. Drinking or swallowing solid food is generally much less painful. The fauces (back of the mouth) especially at the arch of the palate, appear uniformly red, less frequently dark than bright red, the uvula (palate) is involved in the attack, looks swollen and elongated, so that its tip touches the root of the tongue, by which many patients are obliged to swallow all the time, and even causes an inclination to vomit. The tonsils are, likewise, somewhat swollen.

If the disease is neglected at this first stage, or if the patient takes, perhaps, a second cold, the difficulty of swallowing increases a good deal, even to such an extent that the liquid returns by the nose, and the attempt to swallow solids causes actual paroxysms of suffocation. In such higher grades of the disease, even adults are affected with a very foul breath, the fever assumes a more continuous type, and violent headache, nausea and vomiting are seldom wanting. On inspecting the mouth, we find the whole of the back part of this organ dark red, sometimes we notice a few superficial ulcers; the mucous lining is very much swollen, and the tongue thickly coated. In children we have seldom an opportunity of watching these different degrees of the disease; on the contrary, they always feel sickest at the commencement of the attack. Amid a gradual decrease of all the symptoms, the patient generally recovers in seven to nine days, provided no untoward accident interferes with the cure. Only in the lighter forms of the disease recovery may take place in three, and even in two, days.

Catarrhal angina is a prevailing affection of young people; where there is a constitutional disposition to this disease, its attacks continue to a late age; decreasing, however, in intensity. Before the first year it occurs less frequently, between the second and seventh it is one of the most common diseases. Whereas, among young people it is very commonly an independent disease; among individuals between the ages of forty and fifty, on the contrary, it is most generally a mere symptom of some general disorder.

The *prognosis* is always favorable, especially if the catarrhal angina is the only morbid symptom. Some profess to have seen death result from the convulsions caused by the congestion of the brain; in such cases, however, the cause of death has most likely been ascertained only superficially.

#### HOMOEOPATHIC TREATMENT.

In its ordinary form, there is no better remedy for this affection than *Belladonna*. When given every two or three hours, it hushes, in twelve to twenty-four hours, the most violent pains in the throat, removes the febrile and congestive symptoms, and leaves mostly only a little lassitude and an impaired appetite. This effect of *Belladonna* is almost constant



among children, who are sometimes seen in the morning jumping about bright and cheerful, even if they seemed deathly sick the evening previous.

*Dose:* Four pellets every two or three hours.

MERCURIUS when there is loss of strength, profuse sweats, bad breath, delirium, etc.

*Dose:* Six pills every two hours, in a little water.

ACONITE if the fever is very high, with hot skin.

*Dose:* As for Belladonna.

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### QUINSY.

INFLAMMATION OF THE TONSILS, ULCERATED SORE THROAT.—This affection is really met with only to the age of forty or fifty years, very seldom at a later period; most frequently between the years of seven and fifteen. It is certain that persons who have to use their voice a good deal are more liable to an attack of angina, and are more generally affected with the chronic form. One attack of Quinsy predisposes in a striking manner to relapses. Such diseases are more frequent in spring and fall than in summer and winter; their frequent appearance in the same locality at certain periods, justifies the inference that this disorder is sometimes epidemic. Damp, gloomy, and badly ventilated dwellings, are undoubtedly very frequent causes of amygdalitis; we attend families in whom the children are very frequently attacked with this disease, and where, in the absence of any other unfavorable circumstances, the frequency of these attacks can only be accounted for by the unwholesomeness of their habitations. The peculiar relation of syphilis and Mercury to the tonsils, although as yet beyond the bounds of comprehension, is well known. In scarlatina we meet with amygdalitis as a characteristic symptom of the disease; in less frequent cases, amygdalitis likewise accompanies other exanthema, least frequently measles.

**SYMPTOMS.** Acute amygdalitis (Quinsy) generally commences like all other acute affections, with a violent chill, which is speedily followed by an unusual rise of temperature and increased frequency of the pulse, with violent headache, and sometimes violent symptoms of cerebral hyperæmia: so that in the absence of local symptoms, which have not yet made their appearance, we are easily led, especially in the case of children, to suspect the invasion of some acute disease. Generally all the morbid symptoms which occur in catarrhal angina make their appearance in this disease, only they are more continuous, the fever, especially, is less remittent, on which account acute tonsillitis is more readily than catarrhal angina, confounded with some violent acute disease, such as meningitis, even in the case of adults. This is particularly owing to the fact that the local throat-symptoms do not make their appearance at once, but not till the fever has lasted already a whole day; in consequence of which we neglect to examine the throat at the onset of the disease. The throat looks generally redder, more so on one side than on the other. The redness is very soon followed by a swelling of the tonsils; at first only one tonsil being affected,

the other tonsil remaining either unaffected or being attacked after the other. The more rapidly the inflammatory swelling increases in intensity, and the higher the grade to which the inflammation is carried, the greater the danger of the inflammation terminating in suppuration. The swelling sometimes enlarges to such an enormous size, that it is no longer possible to see the back of the tonsils. As the local symptoms increase, the general condition of the patient becomes more and more unfavorable; the fever remains at its height; swallowing is almost impossible, and yet there is a constant urging to swallow. Speech becomes guttural, sometimes quite impossible; the breathing is more or less impeded. During perfect rest the pain is not so great, but is excited or aggravated by every motion. The lassitude is continually on the increase, partly owing to the violence of the fever, and partly to the deficient supply of solid, and more particularly of liquid, nourishment. The tongue is lined with a thick, tenacious phlegm, which is exceedingly troublesome to the patient, and seems to cause the urging to swallow, which frequently results in an inclination to vomit. The bowels are constipated, the urinary secretions diminished, and urine is very thick. In this manner the disease continues about nine days, and sometimes increased to such degree in intensity that the patient, the day previous to the opening of the abscess, seems to be like one near death. Very seldom the general condition improves during the formation of the pus. As soon as the abscess breaks, the threatening symptoms disappear almost immediately. That perfect recovery cannot take place at once, must be self-evident to any one who considers how much strength the body has lost by sleeplessness and deficient nourishment.

Not in every case, and, as we shall show more particular when speaking of the treatment of this disease, is the course of tonsillitis as acute as we have described. From the most violent fever, with sopor and delirium, to a scarcely perceptible disturbance of the general health, all sorts of degrees of constitutional malaise can be noticed, even though the local affection should be the same. If the inflammation is dispersed, this result does not take place very rapidly; on the contrary, in such a case the inflammation is very apt to pass into the chronic form, which is much more rarely met with when the inflammatory process terminates in suppuration. But even if the inflammation is dispersed, a febrile condition of the system, lassitude and loss of appetite, continue for some days, whereas the decrease in the inflammatory symptoms ought to lead one to infer that the general well-being was much improved. The prognosis is almost always favorable. Only in children the disorder may terminate fatally, either in consequence of brain difficulties, or by suffocation, or even, under certain unfavorable circumstances, by mortification of the parts. Among adults, this danger need not be apprehended. Anginas initiating or accompanying exanthematic affections (scarlet fever, etc.,) have to be viewed from a different standpoint to that of independent angina.

The chronic form of amygdalitis arises in most cases out of the acute form, in consequence of the reabsorption of the inflammatory exudation only taking place partially, and the swelling of the tonsil remaining. It seems as though, independently of all constitutional predisposition, such

remaining infiltrations superinduced a tendency to relapses. Every new attack increases the swelling, so that an hypertrophy may ensue, by which access to the pharynx may be almost entirely prevented. After an abscess, hypertrophies of any size occur much less frequently. Without any previous acute attack, chronic amygdalitis may develop itself almost imperceptibly, in persons who have to exert their vocal organs a good deal, such as ministers, singers, actors; but acute cases arising from such causes are not near as violent or important as cases arising from the previously mentioned causes.

It is only exceptionally that the enlargement of the tonsils causes trouble to the patients. It is seldom that they experience any pain; nor is the pain ever very acute, unless an acute attack has just taken place. The most common derangement is an altered tone of the voice, as in an acute attack, and a weakness of the vocal organs, in consequence of which the sufferer is easily attacked with hoarseness. In spite of the swelling, which is sometimes very large, the difficulty of swallowing is either trifling, or else there is no difficulty at all. Only in rare cases the patients complain of the swelling, as of a foreign body in the throat. It is a peculiar feature in such cases, that every cold brings on an acute attack of amygdalitis, which is generally, however, confined to some fever with pain in the throat, and some difficulty of swallowing, with moderate redness of the tonsils. By neglecting such attacks, they may recur so often, and in such rapid succession, that the patient's health may remain disturbed for weeks.

The enlargement of the tonsils is always a very obstinate difficulty, which it is so much more troublesome to remove, as the patients who feel tolerable well otherwise, do not feel disposed to take medicine. In an advanced age the swelling generally disappears spontaneously.

#### ALLOPATHIC TREATMENT.

QUINSY, (TONSILITIS) is often relieved in robust persons promptly, especially if previous attacks have resulted in suppuration, by a brisk saline purge (Epsom Salts) given in a dose a tablespoonful and a half in water. Cold applications should be applied to the neck and lumps of ice taken into the mouth. As soon as the bowels have moved a full dose of Quinine, ten or fifteen grains, and a third of a grain of Morphine, or its equivalent of Opium or Laudanum, should be given. The attack is frequently cut short by this treatment. If the opium cannot be well borne, Tincture of Aconite should be given in doses of a drop every hour until the fever is reduced, and then continued every two or three hours.

In case the disease is not cut short Belladonna or Stramonium (Jamestown weed) should be freely applied to the neck and covered with a warm poultice. Cooling or warm drinks may be given as is most grateful to the patient.

Should the inflammation result in suppuration, as denoted by heavy throbbing pain, the abscess should be opened by a surgeon.

*Chronic enlargement of the tonsils* generally comes on slowly in scrofulous children, weakly youths and young women. The enlargement is sometimes so great that the fauces (throat) seems filled up, and both res-

piration, speech and hearing are interfered with. In these cases the enlarged organ ought to be excised by a surgeon. As much time as possible should be spent in the open air. The habits regular, and the diet good. Frequent bathing should be practiced. Every morning the throat should be bathed freely with cold water. Tonics may be indicated by the general health, and will require changing from time to time. Iodine seems especially useful.

The syrup of the Iodide of Iron may be given in doses of five to ten drops to a child, and twenty drops to an adult. Iodide of Potassium and Pyrophosphate of Iron have a good effect. Ten grains of the former and two grains of the latter, in syrup, is a dose for an adult. This treatment will need to be continued for a long time to be of much benefit.

Irritating the neck over the enlargement, with Tincture of Iodine, applied daily, or every other day, may aid in reducing the enlargement. The best result from Iodine is obtained by injecting the tincture into the substance of the enlargement.

### HOMŒOPATHIC TREATMENT.

*BELLADONNA* should be given, as soon as the patient complains of dryness with difficulty of swallowing, and a sense of constriction or choking in the throat, which, on examination, is observed to be swollen and to present a florid, red appearance. *Bell.* is additionally indicated when the fever continues to run high, when the face is bloated, and the eyes are much inflamed, when there is considerable delirium and a disposition shown to leave the bed, or commit some act of violence, or when the rash, which sometimes attends this disorder, shows a scarlet hue.

*Dose:* Of a solution of eight globules in each, two tablespoonsful of water, give one teaspoonful every two hours until improvement or change.

*PULSATILLA* may be given with good effect, in cases in which the symptoms are mild, and an increased secretion of phlegm, has taken the place of the dryness usually present in the early stages, while the patient is at the same time afflicted with nausea and bilious vomiting.

*Dose:* As for *Belladonna*.

*NUX-V.* is preferable to *Pulsatilla* when the phlegm is very viscid, and is secreted in such a quantity as to create a feeling of threatening suffocation.

*Dose:* As directed for *Belladonna*.

The progress of matters in the throat must, however, be carefully watched.

*MERCURIUS* should be prescribed, as soon as the presence of small ulcers, or, still better, their incipient formation, can be detected.

*Dose:* Three globules in a teaspoonful of water, repeated in two hours, and again in two hours more—unless the *pain and extent* of the ulceration should continue to increase, when proceed at once with the next remedy.

*ACIDUM-NITRICUM* should be administered two hours after the last dose of *Mercurius*, when, from the increasing size and painfulness of the



ulcers, the latter remedy does not promise to arrest their progress or cause them to assume a healthy aspect.

*Dose:* Three globules, as directed for *Mercurius*.

In the milder forms of this disease, the two last named remedies will frequently be found sufficient to conduct it to a speedy and successful termination.

But in those much more dangerous forms, which the complaint so readily assumes when it rages as an EPIDEMIC, and when the patient at the commencement is seized with vomiting and purging, attended with such prostration of strength as to render it impossible for him to leave the recumbent posture without feeling faint and being compelled to fall back exhausted by his efforts: where, moreover, the ulcerations spread with alarming rapidity, and early take on a sloughing character—in such cases the conducting of the disease to a happy issue becomes obviously a much more serious and difficult task.

ARSENICUM will, in the majority of such cases, be promptly required, although sometimes advantageously preceded by a single dose of *Pulsatilla* (as before directed), if called for by the predominance of bilious vomiting. *Arsenicum* is distinctly indicated by that marked *prostration of strength* so characteristic of this disease, accompanied by nausea or vomiting; or when the ulcers present a *livid hue*. This important remedy is also indicated in a more advanced stage of the disease, when the ulcerations are covered with dark sloughs, surrounded by a livid margin; the teeth and lips incrustated with a brownish, fetid discharge; the pulse small and irregular, and there is delirium or constant muttering, with frequent hanging of the lower jaw; laborious respiration; acrid discharge from the nostrils, causing excoriations; the eyes dull and glassy; the skin hot and dry, the thirst excessive, yet the patient drinks but little at a time, and appears to perform the act of deglutition with great pain and difficulty; finally, when the *prostration of strength is so extreme*, that the patient seems rapidly sinking, and a rash of a livid color breaks out in blotches, here and there intermingled with purple spots.

*Dose:* Of a solution of six globules to two tablespoonsful of water, give a teaspoonful every hour, until amelioration or change—continuing the administration at intervals of four hours when the more urgent aspect of the disease has been overcome. In very serious cases the doses may be required similarly every ten, fifteen, or twenty minutes. If in alternation with any other remedy, two doses of *Arsenicum* should be followed by a pause of two hours, and then by two doses of the other remedy in like manner.

CHINA will often be found of service when the tendency to gangrene continues, and the patient is still affected with considerable prostration of strength, accompanied with debilitating sweats.

*Dose:* Pause at least two hours after the last dose of any other remedy, and then of a solution of six globules to two tablespoonsful of water, give a teaspoonful every two hours, until amelioration or change.

NUX-VOMICA is frequently serviceable after *Arsenicum*, when the diarrhœa has been checked, but numerous small, foul, offensive ulcers are seen in the mouth and throat.

*Dose:* Three globules in a teaspoonful of water every hour, until amelioration or change, proceeding with the next remedy, if the subjoined symptoms ensue.

CARBO-VEG. should be administered after a pause of six hours since the last dose of the foregoing remedy, should a copious, fetid, watery secretion be discharged from the ulcers, attended with extreme exhaustion, and small, indistinct, or scarcely perceptible pulse.

*Dose:* Of a solution of six globules to four teaspoonsful of water give a fourth part every hour, until amelioration or change.

ACIDUM-NITRICUM may be employed with great advantage when, from the beneficial effects of *Arsenicum*, or any of the other remedies above mentioned, the strength of the patient becomes invigorated, the countenance more animated, and the sloughs are thrown off in a satisfactory manner, yet the ulcers threaten to become indolent; under the influence of this remedy these will, in most cases, very speedily acquire a clean and florid bottom, and begin to heal.

*Dose:* As for *Belladonna*.

#### PHARYNGITIS.

In simple inflammation of the throat (Pharyngitis) is most properly treated by a mild purgative. Gargles of a solution of Chlorate or Nitrate of Potash (Saltpetre) may be used to relieve the dryness and irritation of the throat. A small quantity of mucilage or Glycerine applied to the throat with a brush or mop will meet the same end. If the case should not end at once in recovery, Chlorate of Potash may be given internally in doses of ten grains, three or four hours apart and Quinine in doses of three grains three times a day. Should restlessness be great, an anodyne of Opium and Hyoseyanus will be needed. One grain of each may be given at bed time.

Should there be much secretion from the throat, five drops of the Tincture of Belladonna should be given every hour until a slight dryness of the throat is felt, and every three or four hours thereafter. If there is much fever Aconite should be given as directed for Quinsy. It can be given with the Belladonna.

In sub-acute cases the throat is frequently dry and may be relieved by the frequent application of Glycerine and by allowing lumps of sugar to dissolve in the mouth. If other measures are needed they are the same as those just described for the acute form of the disease.

For the chronic form of the disease, which is quite common among professional men and others who lead a sedentary life, the treatment is, I believe, mostly hygienic. More time should be spent in the open air. Indeed it would be better if some calling "out of doors" could be followed until the throat wholly recovers. Then such time should be spent out of doors as will maintain the body at its greatest vigor. This and recreation for both body and mind is necessary, and no treatment is useless without it, generally unnecessary with it. Regular sleep of eight hours every night is also an essential. Every working man (physical or mental) requires one day's rest in seven. The clergyman should rest every Monday and all others on the Sabbath. The throat requires protection. For this there is nothing better than a full beard, which nature provides.

Tonics may be necessary, if the body does not regain its vigor. The form of the tonic should be changed from time to time and their use continued for a long time.

Astringent applications are useful especially in the follicular variety.

A gargle of Alum a dram to the pint of water, or Sulphate of Zinc a half a dram to the pint, or Tannin in Glycerine, a dram to the ounce, applied with a camel's hair brush or mop are useful. If the secretion is great, ten drops of the Tincture of Belladonna may be given two or three times a day.



### DIPHTHERIA.

This disease generally commences with unimportant symptoms of fever, and most commonly without and local appearances. Only in a few cases may be observed symptoms of a not very intense inflammation of the tonsils. Hence, the case is *usually* neglected at this important point, because neither the patient nor the family are disturbed or uneasy about the matter. At first, there is a slight redness of the back of the mouth, (*fauces*), the vessels in one or more places being full or injected. It is here that in a few hours you may first see traces of the patches of mucus (*exudation*). At the same time the redness increases considerably, without, however, spreading to the front part of the mouth. One or more snow-white membranous patches seem to be laid loosely upon a deep-red or bluish-red or violet base; they have exactly the appearance of a layer of cream spread upon the mucus membrane (skin of the mouth). But yet the general health is not very much disturbed; the fever is slight, the pulse not very much increased in rapidity, the skin is not very dry, even a slight perspiration breaks out from time to time, swallowing is not much hindered, the pains at the affected part of the throat are not very acute. *Only* a general feeling of lassitude shows that the local appearances have a deeper significance than one would suppose. The affection may, (if not prevented by remedies), thus remain unchanged for the first seven days, only the exudation at most, invades a few other parts, in addition to the former. In the most fortunate cases the membranes become detached at the end of this period, leaving sores on the surface, (where they were attacked), with shaggy borders, which heal rapidly and leave the patient restored to perfect health. If the disease does not take this favorable turn, it assumes a much more serious form in the second week. The formation of the membranes keep spreading; they assume rather a dingy, blackish hue; the constitutional disturbance is more marked; the pulse remaining about the same. The prostration increases, yet the patients, even in violent cases, are not always compelled to lie down. Sleep is generally very much disturbed. The pains in the throat are intense, swallowing and speech are very much impeded; the patients often complain of violent earache, which is not constant, but comes in by spells. This stage also lasts a week (if not prevented by remedies) and may be followed by recovery; the ulcerative process, however, is much sharper than at the end of the first week. The further progress of the disease in the third week consists in an increase of the constitutional symptoms, but principally in

gangrenous destruction of the affected parts in the fauces. There arise deep ulcers of various sizes, with a gray or blackish bottom, with shaggy borders and having a horrid smell. The loss of substance may be very considerable. The salivation is copious and very fetid; the patients look very ill, although they may yet be capable of walking about. The termination in recovery is a very slow process, in so far, at least, as recovery depends upon the healing of the ulcerated surface; for the constitutional symptoms show a marked improvement, at a period when the ulcers still retain their malignant appearance. The return of the appetite is the most favorable symptom, likewise the decrease of the salivation and the fetor from the mouth. It takes several weeks before the ulcerated surfaces are completely healed. It is peculiar to this disease that, as the local symptoms disappear, a more or less universal paralysis sets in; this is not always the case, but very frequently.

In the preceding description we give a picture of an attack of moderate violence, and running a favorable but very protracted course. This case may be regarded as a fair illustration of most cases of diphtheria. Under certain circumstances, the disease offers a very different group of symptoms, which the importance of the subject demands should be faithfully portrayed by us. In the more *violent cases*, the preliminary stage is often very short. The disease sometimes enters the system so rapidly and with such extraordinary intensity, that the patient is at once attacked with excessive prostration, a small pulse, death-like pallor and death takes place as soon as the membranes begin to form. In other cases the disease begins quite suddenly with vomiting and an intensely sore throat, violent fever, heavy sleep, stiffness and external swelling of the neck and extraordinary frequency of the pulse.

The speech is peculiarly altered, on account of the difficulty of moving the tongue. The vomiting consists of a thin, yellowish liquid, and is very often accompanied by a similar diarrhœa. The formation of the membranes takes place very rapidly, spreading almost simultaneously over the entire mouth and throat, even extending to the nose. The swelling of the adjoining parts and of the external neck becomes quite considerable, so that it extends like a thick pad around the lower jaw. At this time the fever symptoms are not very high, even if they had run ever so high at the commencement of the attack; but the strength decreases very rapidly. When the attacks are so violent, the formation of the membrane extends towards the lungs, where it occasions all the symptoms of true croup, induces, at an early period, suffocative paroxysms and stupor and usually terminates fatally, death being preceded by very violent vomiting. Very seldom consciousness remains undisturbed until the moment of death. After such violent attacks, death generally follows in two to four days. In certain conditions of the system, the affection runs a chronic course, the membranes being frequently detached and renewed again, and at the same time being confined within definite localities. In this way the strength of the patient vanishes by degrees, and death is almost always the end of this chronic form of the disease. If the constitution of the patient is, at the outset, thoroughly tainted with scrofula, consumption or other diseases, the membranes evince, from the commencement, an extraordinary tendency to decomposition, and death results at an early period, although



the extent and intensity of the disease may not yet seem very far advanced. Unfavorable external circumstances, such as damp dwellings, a crowd of persons living together in small rooms, insufficiency of fresh air likewise exert a deleterious influence, on which account the worst forms of the disease are more frequently met with among the lower than among the higher classes.

The prognosis of diphtheria is always doubtful, for the disease may terminate fatally, no matter what course it may take. If the disease sets in accompanied by symptoms of violent constitutional disturbance, the danger of a fatal termination is very great, since we may almost be sure the more unfavorable the constitutional and domestic conditions of the patient, of a more general spread of the poison, the more rapid the prostration, the less the chances of recovery. The extension of the the diphtheritic process to the larynx and lungs, is almost always fatal. Nor should the protracted and mild course of the disease superinduce a feeling of security, for even then a malignant aspect may supervene. One of the most threatening symptoms is a deposit in the urine, that, when heated, changes like the white of an egg (albumen), especially if there is a large amount of it.

When the disease has subsided, it is found that paralysis, either general, or of special parts, or derangement of the special senses, such as hearing, smell, taste, etc., remain as sequelæ of this formidable malady.

#### ALLOPATHIC TREATMENT.

We have to contend with a constitutional disease belonging to the same category as small-pox, scarlet fever, and other infectious diseases, and, like them, due to a special virus, or blood poison. This, of late years, has become more generally recognized. The trouble in the throat, and the development of a false membrane are regarded as special lesions (local disorders) characterizing the disease. The treatment will then be both general, or addressed to the condition of the system, and local or addressed to the local lesions, the former being regarded as supreme.

In the great majority of cases which prove fatal, the mode of dying is by asthenia, (failure of the powers of life). This fact calls for remedies of a supporting kind. These, as almost every one who have witnessed much of diphtheria must feel, almost alone give any promise of being useful. There is no specific for the disease, and all we can reasonably hope from treatment is, to guide the patient safely to the end. It is true some practitioners report almost uniform success in treating this disease, but as the same plans of treatment have not proved more than usually successful in other hands, it is to be inferred that the cases reported were largely or wholly a disease less dangerous, probably follicular sore throat, which have, by mistake, been called diphtheria.

In local treatment, the great objects to be kept in view are, to favor the separation of the false membrane and prevent its extension, and give relief, as far as possible, from the suffering experienced from the affection in the throat. Of the external applications to the throat, they are all either injurious or useless. Blisters, leeches, and remedies of that class, are powerful for harm, while poultices and other mild applications fail to give relief, though it cannot be said that they are productive of harm.

In selecting local remedies, it should be borne in mind that the progressive extension of the false membrane and local inflammation is not a spreading of the same properly considered, but the successive invasion of the different parts as to the agency of an internal determining influence, and that influence is the special morbid condition which constitutes the disease. If that is true, topical treatment will be likely to exert but little influence in controlling the extent of the local disease. In conformity with this view, many, if not the great majority, of practitioners have abandoned the use of cauterizing and irritating local applications to the throat, (both inside and outside), and are content with the use of soothing and antiseptic (anti-putrid) local measures. Hence the strong solution or solid stick of nitrate of silver, sulphate of copper, alum, hydrochloric acid, and the astringent preparations of iron *are not to be used*. So far as my own opportunities for observation enable me to decide, the milder measures are to be preferred.

The remedies which enjoy a reputation for meeting the ends desired in local applications are, carbolic acid, sulphurous acid, lactic acid, chlorate of potash, and permanganate of potash. I usually combine carbolic acid with a solution of chlorate of potash as follows: Take of chlorate of potash four drams, dissolve in eight ounces of hot water, and when cold add one dram of carbolic acid. This is a useful gargle, or it may be applied with a soft linen mop, or by a spray-producer, in cases not old enough to gargle.

Sulphurous acid one or two drams to an ounce of water, is also useful and may be applied by a mop or in atomized spray; the usefulness of this remedy is attested by high authority, and is so grateful to the patient that its use is frequently asked for every few hours.

Lactic acid enjoys a reputation of being an excellent solvent of the false membrane, used in the same way as before mentioned, in the strength of three and a half drams of the acid to two ounces of distilled water; if the spray is used, the eyes should be protected by a bandage or napkin; if used as a gargle, it should be diluted until the water is distinctly sour. One or two grains of permanganate of potash to the ounce of water is the proper strength for the use of that drug, and the methods of using it are the same as above mentioned.

Bromium five grains, Bromide of Potassium two grains, water one ounce, is a mixture highly extolled by some practitioners. It should be applied by a mop or in spray.

Probably as useful an application as can be found at hand in domestic practice is common lime water. It may be used in any of the ways before named. Small pieces of ice held in the mouth, or in young children a teaspoonful of ice water, swallowed occasionally, give relief.

When the false membrane is removed and the local inflammation begins to decline, all local applications should cease.

The greatest danger from the local affection is from its invasion of the larynx (the organ at the top of the wind-pipe); it is accompanied by a croupy cough. As soon as respiration is interfered with an emetic should be given, which produces but little prostration.

The end is to expel the false membrane from the wind-pipe. For this purpose the Yellow Sulphate of Mercury in three to five grain doses

rubbed up with sugar, may be given ; Sulphate of Zinc in doses of five to ten grains, repeated every fifteen minutes until vomiting is produced ; or powdered Alum, in doses of a teaspoonful mixed with syrup or honey, repeated every half hour, until the patient vomits, meets the end required.

The patient should, also, breathe steam constantly, either from Roucheti's Croup Kettle, or by keeping the room filled with steam from boiling water. Quinine given internally, given to the extent of reducing the pulse, is thought useful by most physicians. A grain may be given to a child, from three to five years old, every two hours, or five grains to an adult. If the respirations become greatly embarrassed and lividity of the face occurs, the case will probably prove fatal in spite of all efforts, but the physician ought at once to perform tracheotomy (opening the wind-pipe that the air may enter the lungs through the opening). Sometimes life is saved, and at all events the last hours are rendered more comfortable.

Regarding *general treatment*, there should be no prostrating remedies used. Emetics or cathartics are not to be given ; but if the bowels are constipated they are to be moved by an injection of a dessert spoonful of castor oil, or a couple of compound cathartic pills. The line of treatment should embrace tonics, nourishment and stimulants. Of remedies, the Sulphate of Quinine, the Tincture of the Chloride of Iron, Chlorate of Potash and Brandy are especially to be named as having been found useful. In my opinion, quinine should be given from the beginning of the disease to the extent of tolerance, *i. e.* until the pulse is slowed and a slight ringing of the ears is produced—in doses of one grain to a child and five grains to an adult, from two to four hours apart. In debilitated patients there is no doubt of the benefit of iron ; it should be given from the first and is well combined with Chlorate of Potash. I consider this a useful mixture: Take of Tincture of Iron two drams, Chlorate of Potash two drams, Simple Syrup two ounces. Mix.

*Dose :* A teaspoonful to an adult, or fifteen or twenty drops to a child, in water, every four hours.

Nourishment forms an important point in the treatment. It should be concentrated, highly nutritious and varied. Milk, cream, eggs, and animal essences best meet these requirements. They may be used in the forms described in the article on the treatment of scarlet fever. A serious difficulty in the treatment often arises from the refusal to take food, possibly from repugnance and from vomiting. Owing to this difficulty in some cases and sometimes from a failure to appreciate the importance of feeding, death takes place from starvation. Food should be given from four to six hours apart, night as well as day.

Should the fever run high or prostration be noticeable brandy should be given at once without reference to other medicines, as a means of supporting the powers of life. There is also reason to believe that both brandy and quinine protect the system against the action of the disease poison. A teaspoonful of the former for a child and a tablespoonful for an adult, properly diluted in sweetened water or milk, from two to four hours apart, is the usual method of administration, though double these quantities have been given hourly with good effect, and without producing

excitement. Permanganate of Potash, two grains to the ounce of water, given in teaspoonful doses every three hours, is thought by many to be useful. Bisulphite of Soda is thought by some to have special powers over the disease, but probably its usefulness is overrated. It may be given as follows: Take of Bisulphate of Soda four drams, Tincture of Orange Flowers one ounce. Water four ounces. Mix. Give a child three years old a teaspoonful and an adult a tablespoonful every two or three hours.

Incidental symptoms demand attention. Vomiting is to be relieved by Bismuth in five grain doses, Creosote in doses of a drop in water, or Hydrocyanic Acid in doses of three drops, repeated hourly. Diarrhœa calls for astringents, and if severe, for opiates (see article on the treatment of Diarrhœa.) Anodynes may be required to relieve restlessness; for this purpose equal parts of Paregoric and Tincture of Hyoscyamus is useful for children, and may be given in doses of from ten drops to a teaspoonful according to age. For adults ten to fifteen drops of Deodorized Tincture of Opium may be given with a teaspoonful of Tincture of Hyoscyamus. Hemorrhage may be relieved by Persulphate of Iron, used locally, and Gallic Acid or Fluid Extract of Ergot internally, in doses of a dram.

Under all circumstances, the patient should be kept in bed, and in the recumbent posture. The disease is so weakening that slight exertion has been known to cause fatal syncope (fainting.) The room should be kept warm, and the air moist with steam. The room should, occasionally, be disinfected by burning powdered sulphur upon a shovel of coals, or by evaporating a few drops of carbolic acid on the surface of hot water. Ozone (active oxygen) may be generated in the room, by pouring a little strong sulphuric acid upon iodine scales in a deep glass dish, with benefit. Cleanliness is absolutely necessary, and the management should be similar to that for contagious diseases. (See article on scarlet fever.)

Children not affected, being specially liable to the disease, should, if possible, be removed to a neighborhood free from the disease.

In a disease so serious as diphtheria where physicians are not content to trust their own judgment alone, in case of its occurring in a member of their family, without calling in the aid of a physician, I hardly presume that any intelligent person will take the responsibility of managing the disease in his family without the guidance of a skilled physician, even if the directions in this article are never so plain.

#### HOMEOPATHIC TREATMENT.

BELLADONNA is frequently of great value in the early stage of mild cases, more particularly when the disease sets in with marked febrile symptoms, and there is marked redness and inflammation of the tonsils; the patient is uneasy and restless, and complains of the throat; is drowsy, and cannot sleep, or starts up suddenly out of every sleep.

*Dose:* Of a solution of twelve globules to five teaspoonsful of water, give a teaspoonful every two hours, until amelioration or change. Many mild cases, with the above characteristics, will be properly relieved and cured, by this remedy alone; and should amelioration be noticed, the interval between the doses should be lengthened to three or four hours, according to circumstances. Should the symptoms recur with violence, however, after having been once mitigated under the action of *Belladonna*, do not resort to that remedy again, but select one of the subjoined.



**ACIDUM MURIATICUM.**—This remedy has proved of great efficacy in a number of cases of simple diphtheria, and may very generally be administered as soon as the membranous deposit begins to appear, and particularly when there is not much glandular swelling, but considerable prostration of strength and fetid breath, with little fever, but marked lassitude and weariness.

*Dose:* Three drops of the second decimal dilution in a teaspoonful of water, every hour, until relief or change. In the event of improvement, lengthen the intervals to two hours, then to three hours, and so on, until the cure is complete; but if the exudation spreads to fresh surfaces, in spite of the employment of *Acid. Muriaticum* for from twenty-four to forty-eight hours, another remedy must be selected.

**MERCURIUS PROTIODATUS.** One of the best remedies. Should the throat present a *deep-red appearance*, and the tonsils and the surrounding parts be considerably *swollen* and studded with specks of exudation; and if, moreover, there be cold in the head, accumulation of mucus in the throat, *and excessive secretion and flow of saliva of a fetid odor*, *Mercurius* is a useful, if not an indispensable remedy. It is an important remedy in all forms of the disease.

*Dose:* One grain of the third trituration in six teaspoonsful of water, a teaspoonful every two hours; or as much of the trituration as can be carried on the point of a penknife, administered dry (undissolved), at the same intervals, until amelioration or change; but if, after the lapse of forty-eight hours, or even a shorter period, the exudation, fetor, and swelling increase, proceed to select another remedy.

**KALI BICHROMICUM.** In the event of no improvement, from thirty-six to forty-eight hours after the employment of *Mercurius protiodatus*, and particularly when the disease extends into the posterior parts of the throat, and thence into the nostrils, *Kali bichromaticum* should be selected. It is, moreover, indicated by a tough and stringy discharge from the nose or mouth; pain in the left ear; swelling of the glands under the ears; croupy cough; measles-like eruption, and red and shining tongue.

*Dose:* As directed under *Mercurius protiodatus*.

**ACIDUM NITRICUM.** When, notwithstanding the employment of *Acidum mur.* or *Mercurius*, superficial patches of exudation continue to present themselves; and when the throat, in place of healing, becomes painful and of a vivid-red color; also, when there is a tendency to ulcerative complication, and the gums are disposed to bleed, this remedy may be employed with advantage. It is further indicated by the presence of ulcers on the mucus membrane of the mouth, and by an acid, corrosive discharge from the nose.

*Dose:* Two drops of the third decimal dilution in a teaspoonful of water, every two hours, until relief or change.

**KALI CHLORICUM.** When, after a period of not longer than forty-eight hours, the above described symptoms either remain stationary, or become aggravated; or when the gums are more or less red and swollen, and the exudation is extensive, but confined to the mouth and palate, *Kali chlor.* may be substituted with the best results.

*Dose:* Same as directed for *Acidum Nitricum*.

PHYTOLACCA is a remedy which has been promptly curative in many cases of diphtheria, particularly in the mild, or non-malignant variety. It is indicated, more particularly, when there is considerable febrile manifestation; headache; violent, aching pains in the back and limbs; great weakness, so that the patient cannot stand, and gets faint and dizzy, even when rising up in bed.

*Dose:* As directed for Acidum Muriaticum.

LACHESIS will prove useful when the inflammation and the diphtheritic deposit commence on the left side of the throat, and either remain there, or spread to the right side. It is further indicated when the patient is always worse after sleeping, and cannot bear the slightest pressure on the throat. It is frequently useful after the previous employment of *Belladonna*, and in malignant forms of the disease, when mortification or sloughing of the parts threatens.

*Dose:* As directed for Belladonna.

LYCOPodium should be given, in mild cases, when the *right* side of the throat is first invaded, and the soreness is aggravated by *warm* drinks; the nostrils are stopped up, and the patient cannot breathe with his mouth closed; starting and jerking of the lower limbs; dread of being left alone.

*Dose:* As directed for Belladonna.

APIS MELLIFICA should be given when there is great debility from the commencement of the disease; the false membrane presents a dirty-grayish hue; there is puffiness around the eyes, pain in the ears when swallowing; an itchy, stinging eruption on the skin; numbness of the feet and hands.

*Dose:* As directed for Belladonna.

CANTHARIDES will prove very efficacious in many cases when the diphtheritic exudation appears in patches; the adjoining surfaces of the mucus membrane being of a bright-scarlet redness, with intense *burning* and dryness of the throat, and great thirst, the burning resembling that produced by the application of a blister. It is further indicated by derangement of the urinary organs, manifested by burning and scalding on urinating; or by a suppression or increased discharge of urine; as well as by extreme prostration, and an irritable looking rash upon the skin.

*Dose:* As directed for Acidum Nitricum.

#### HOME REMEDIES.

Frequently gargle or wash the mouth and throat with a solution of Salt, Pepper, and Vinegar; or a solution of Saleratus in water; or Borax and Alum in solution of water with a little Brandy added, if at hand. The patient should be removed to a clean bed, in a dry, well ventilated room, kept sweet and clean, and no one should be allowed to sleep in the room except the attendant. All visitors or callers should be positively kept out of the sick room.

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#### PAROTITIS.

We comprehend under this designation two tolerably distinct conditions which have, however, this in common: that the salivary glands

are the seat, or rather the starting point of the disease. Consequently we shall first describe parotitis proper, or an inflammation of the parotid gland, together with the non-malignant inflammation of the other salivary glands, and afterwards the malignant form of the disease attended with gangrene of the cellular tissue.

PAROTITIS, INFLAMMATION OF THE PAROTID GLAND, (MUMPS, ANGINA PAROTIDEA.)

\* This affection is at times epidemic, and as such has received the above series of names; at other times it is a secondary disorder, to be regarded as a complication of other diseases. The symptoms differ accordingly.

MUMPS is generally preceded for a few days by febrile symptoms. The patients feel languid, sleep is uneasy, the appetite is gone; headache, with a feeling of stiffness in the muscles of the back of the neck, is scarcely ever absent; a slight catarrhal irritation of the digestive tract is likewise generally present. After these preliminary symptoms have lasted for a short period, sometimes even for several days, the region below the ear on one side begins to swell, the swelling spreading very rapidly over the cheek and under the jaw; in a short time the face looks very much disfigured by the swelling. The swelling is not very painful even to rather hard pressure; the color of the swelling does not differ from that of the surrounding skin, except sometimes a slight redness; the swelling is at times of a stony hardness, at times it is soft, and at other times has an uneven feel. The movements of the head, more especially of the jaws, are very much impeded. With the appearance of the swelling, the general symptoms usually improve, the fever abates rapidly, and the patients, in spite of their great disfigurement, feel tolerably well. In most cases the swelling spreads to the other side in one or two days, but here never attains the same size as on the former side. If the swelling runs a normal course, it generally reaches the climax on the fifth day, after which it gradually begins to disperse, so that between the tenth and fourteenth day no trace of the swelling remains visible. With a higher grade of inflammation, or under otherwise unfavorable circumstances, the redness assumes an inflammatory erythematous character, and suppuration may take place, which, in comparison to the size of the swelling, remains inconsiderable, but protracts the course of the disease very greatly. The swelling takes this course more frequently in the case of adults than in that of children; in the case of the former, an inflammatory hardness of greater or less extent frequently remains for some time. Only in rare cases, or if the affection assumes a certain degree of malignancy, as it sometimes does in certain epidemics, the brain may become involved in the process. What is more frequently the case is, that the testicles, or the labia majora, swell suddenly, while the swelling about the neck disappears; both swellings may, however, coexist.

Secondary parotitis occurs in the course of many acute diseases, particularly typhus; in some typhus epidemics it is a constant sequela of the disease, whereas, in other epidemics, it is entirely absent. The appearance of the swelling is not bound to any definite period of the disease; at times we see it break out at the commencement, at other times during the period of convalescence. It is generally preceded by local pains, in-

creased congestions of the head, even delirium and chilly creepings; its rapid development is seldom attended with abatement of the fever. The further course of the local process is similar to that of the genuine mumps; the swelling either scatters or else it terminates in violent inflammation with suppuration, which, during a state of great constitutional prostration, may assume a malignant form, with the discharge of pus. Whereas, in the former case, parotitis always indicates a favorable course of the general disease; the formation of pus, on the contrary, always portends danger, and is at least a disturbing complication. It is difficult to determine beforehand of what character the swelling will be; but when parotitis sets in at the acme of the disease, it is always more dangerous than when it occurs at the commencement or during convalescence. Here, too, as in the case of mumps, an induration may be left behind for a long time. In isolated cases, of either variety, the ear seems to be affected, hardness of hearing and discharge of pus from the ear, remaining after the disappearance of the swelling.

The CAUSES of parotitis is involved in obscurity, in so far as we are unable to determine by what atmospheric or other influences the disease is caused. Its epidemic character leads us to adopt the existence of some peculiar miasm, similar to the miasm of typhus, cholera, etc. We know that the common epidemic mumps prevail most frequently in the fall and spring. But it is a mystery why the parotid gland should be invaded in acute diseases of the general organism, in one epidemic quite frequently, in another scarcely ever; or why, at one time, it should be harmless, and at another time a phenomenon portending great danger. This difference accounts for the circumstance why some consider this form of parotitis a dangerous, and others a trifling, disease.

An inflammation of the other salivary glands often accompanies parotitis as an accessory disorder. Numerous facts lead us to believe that each separate salivary gland may become the seat of an affection like mumps. After very acute diseases we have often noticed stony swellings of the lesser salivary glands of a very obstinate character, and running their course amid a general prostration of strength.

#### ALLOPATHIC TREATMENT.

The treatment of parotitis (or mumps), only requires soothing applications, as warm fomentations and wool flannel or cotton to the neck. Severe pain will call for an anodyne for its relief. Opium combined with hyoscyamus is generally the best for this. A pill of a grain each of Extract of Opium and Hyoscyamus at night, and repeated once or twice in the twenty-four hours, will generally be effectual. Generally, when warm applications, the addition of a little Laudanum to the fomentation will suffice. The bowels should be kept regular. The diet should be light. Milk is the one article which seems best suited.

#### HOMŒOPATHIC TREATMENT.

In ordinary mumps, which run a very rapid and painless course, it makes very little difference what medicine is given; indeed, the affection might safely be left to take its own course. However, inasmuch as



we cannot well know what the final termination of the affection may be, it is best to always give the suitable remedy, since we can rest assured that under its use suppuration will only take place exceptionally. The best remedy is *Mercurius*. The specific action of Mercury upon the salivary glands is well known. It not only increases the secretions of these glands, but likewise causes a real inflammation in the body of the glands which may readily terminate in suppuration, as is often seen in the violent treatment of diseases with large doses of Mercury. No remedy prevents suppuration as certainly as *Mercurius*. *Belladonna* deserves a preference, if the constitutional symptoms are very severe, and the swelling assumes an erysipelatous character.

### TOOTHACHE.

#### ODONTALGIA. PAIN IN THE TEETH.

When we find a constant disposition to this painful condition of the teeth on the slightest exposure to cold, or indiscretion in diet, without any other presumable cause, or what is generally called *rheumatic toothache*, we are warranted in concluding that some taint lurks in the constitution which must be sought for, and, if it can be, eradicated. Otherwise the best selected remedies will frequently fail in affording relief where most expected, or, if relief is obtained, it is only temporary. By common consent this, and all other diseases of the teeth are turned over to the dentist, and as they are now generally educated and fully prepared for their professional duties, this custom is becoming more and more general, and now it is safe to depend on them to do the best that can be done for you.

#### ALLOPATHIC TREATMENT.

Toothache may be neuralgic, and if so, will be treated as described for that disease. When resulting from a decayed tooth, a drop of Carbolic Acid or Tincture of Opium (Laudanum), Aconite or *Belladonna* usually gives relief. Often in instances of old, decayed teeth, inflammation of the fang has occurred. Heat may then relieve, or the discharge of a little blood may accomplish the result. Generally, however, the advice of a dentist should be followed.

#### HOMŒOPATHIC TREATMENT.

*MERCURIUS* holds a front rank among medicines, being indicated by pains in decayed teeth, or in the roots of the teeth, frequently occupying one whole side of the head and face, extending even to the ears, loosening of the teeth, and a feeling as if they were too long. The pain becomes worse towards evening, and especially *at night* in the *warmth* of the bed, is worse after eating or drinking anything *cold*. Swelling and inflammation of the gums. This medicine is especially useful to persons who are subject to swelling of any of the glands of the body.

*Dose.* Four pills or a small powder of the 3d x potency every two or three hours until improvement or change.

*BELLADONNA*.—When the pains are very severe, of a drawing, tearing or shooting nature in the teeth, face, and ears, with swelling of the cheek, *dryness* of the mouth or *excessive* secretion, like salivation; great

thirst. Pains come on suddenly and leave just as suddenly; face flushed and eyes red.

*Dose:* Six pills every two or three hours.

BRYONIA.—Pains in *sound* teeth. Sensation of being *too long*, with drawing, jerking pains. Worse at night and from taking anything *warm* in the mouth. Constipation, stools dry and hard as if burnt. Improved by being still, and cold applied in the mouth.

*Dose:* As for Belladonna.

CHAMOMILLA.—After taking cold when in a perspiration. The pains are drawing, jerking, beating or stitching. Intolerable pains at night, driving one to despair. One cheek red and the other pale. Becomes almost furious about the pains. Worse in the open air. Very impatient.

*Dose:* As for Belladonna.

PULSATILLA.—Suited to persons of a mild disposition easily moved to tears. Toothache with earache *or* headache. Pains as if the nerve was put on the stretch and suddenly let go again like a piece of rubber. Better from cold things and worse from warm. Chilliness even in a warm room. *Scanty or suppressed menses.*

*Dose:* Five pills every three or four hours.

SEPIA.—Toothache *during* pregnancy where there is sallow complexion with spots on the face.

*Dose:* As directed for Mercurius.

NUX VOMICA.—Sore pains or jerking, drawing stitches in the teeth and jaw. Worse early in the morning. Where the result of mental labor, sedentary habits, or constipation or the use of intoxicating drinks.

*Dose:* As for Belladonna.

SULPHUR.—Where *Nux* appeared indicated but failed. Pains in hollow teeth. Made worse by *cold* drinks. Burning heat on top of the head.

*Dose:* As for Pulsatilla. The 30th potency is best.

#### SCORBUTIS.—ALLOPATHIC TREATMENT.

SCORBUTIS (scurvey) will scarcely be met with in the history of the family that is even moderately well supplied with a variety of food. Though lack of food in proper quantity and quality is the chief cause of the disease; exposure to wet and cold, bad ventilation and depression of spirits causing indifference to food, may be added as causes of the disease. For its preventive and, also, its cure, these causes must be removed. The diet should be composed of articles which will supply the system with its needed elements. Of these, I believe, milk stands first. Fresh meat and fresh vegetables, in great variety, with fresh fruits and starchy food, are to be freely given. The apartments should be warm and well ventilated. When the skin is dry, warm baths are called for. Constipation is to be relieved by injections or mild laxatives. Diarrhœa will call for the astringents directed in the treatment of that disease.

Pain in the limbs or joints can generally be relieved by rubbing them with a mixture of Laudanum and Turpentine in equal parts. If it is too irritating, a little Sweet Oil may be added. Or a liniment of equal parts of Tincture of Aconite, Chloroform and Soap Liniment, may be used.

Tonics are generally called for. The Citrate of Iron and Quinine in doses of three grains, meet the end required. Bitter infusions made with an ounce of the crude drugs (Peruvian Bark, Gentian, Quassa, etc.), to a pint of hot water, in doses of a half a wineglassful, before meals, will answer the purpose. If this be used, the Tincture Muriate of Iron should be given in doses of ten to twenty drops, in sweetened water, after each meal.

The juice of lemons, oranges, or limes should be given to the extent of the patient's wish. Cream of Tartar (Bitartrate of Potash) may be given quite largely, as having a direct effect on the disease, in doses of a teaspoonful several times a day. A couple of teaspoonsful four times a day, is thought, with reason, capable of preventing the disease, when the supply of fresh vegetables, etc., is deficient.

A solution of Alum will generally suffice as a mouth wash, called for by the condition of the gums. Other astringents may be used.

Hemorrhage will be met by scruple doses of Gallic Acid, or teaspoonful doses of Ergot, or turpentine in doses of fifteen drops, given on sugar.

A similar condition of the system to that existing in this disease, which results from continued prostrating disease, is to be met with the same remedies.

Much of the so called scurvy of the gums results mostly from neglect of cleaning the teeth, "tartar" accumulates on them, and the gums become unhealthy. The proper course is, to have the tartar removed by a dentist, and then kept off by frequent and thorough brushing.

## Part Fifth.

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### DISEASES OF THE STOMACH AND INTESTINES.

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## CHAPTER XII.

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### BILIOUS COMPLAINTS OR DYSPEPSIA.

Bilious complaints have, of late years, become the popular term for almost all derangements of the digestive functions. The truth is, however, that in affections of this nature, although in very severe cases, the Liver or Biliary system is more or less powerfully affected, yet it is generally so only by sympathy; and the real seat of the disorder is in the stomach and bowels, except, indeed, amongst Europeans resident in tropical climates, or who have recently left the tropics.

In considering the various forms of derangement of the stomach under the general, more appropriate, and more comprehensive designation of Indigestion, therefore, we shall have occasion to include the majority of those symptoms which are ascribed to the two opposite causes of derangement, inactivity of the liver, and too great a secretion of bile.

### INDIGESTION OR DYSPEPSIA.

#### FUNCTIONAL OR ORGANIC DISTURBANCE OF THE MUCOUS MEMBRANE OR NERVES OF THE STOMACH.

*Nausea, Eructations, Depression of Spirits, and other Sympathetic Affections.*—What is termed INDIGESTION may be identified as the prolific parent of Chronic Disease.

This disease, however, appears in so many forms, that we shall simply content ourselves here with sketching out a general outline of its chief distinguishing features, and enumerating some of the principal predisposing and exciting causes to which it may usually be traced, directly or indirectly.

**PREDISPOSING CAUSES.**—Close, unhealthy, ill-drained, ill-ventilated dwellings; the atmosphere of some factories; *hereditary or other constitutional defects*; the influence of the atmosphere of particular climates and localities; exposure to unhealthy exhalations; the water of particular localities, which is impregnated with mineral substances (such as lead) and in which the diseases of this nature assume an endemic character, etc.

**EXCITING CAUSES.**—Irregularities in diet—such as an over-indulgence in the pleasures of the table, partaking of rich and indigestible food and stimulating soups; excess in the quantity of food; excessive use of wine, malt and spirituous liquors, tea, coffee, and other stimulants; imperfect mastication of food, irregularity of, or too long fasting between meals;



indolent or sedentary habits; exhaustion from intense study; keeping late hours; mental emotions; reaction from the external surface, etc.,

The foundation of this disorder is frequently laid in early life, by the frequent and copious administration of aperients, calomel (in large doses) and other deleterious drugs; and the evil is perpetuated in more mature age, by a continuance of the same absurd and injurious system.

An abuse of coffee and tea is a frequent cause of many descriptions of sick and nervous headache, attended with excitement and symptoms of deranged digestion, which will frequently disappear of themselves on the disuse of these beverages. If, however, the troublesome symptoms should continue, a course of treatment should be adopted in conformity with the following regulations.

INDIGESTION, or that which we understand by the term, is not, however, necessarily associated with physical suffering of any kind, much less with sensation of pain, or any distinguishable sensation in the stomach or intestinal region itself. It very frequently occurs in its worst *organic* forms, without so much as *observed*, exhibiting any symptoms whatever, developed in the digestive organs themselves. But in such cases it has reacted upon some other portion or portions of the organic structure, and may be distinguished in the affections occurring in other organs, and which, therefore, very frequently become susceptible of mistaken interpretation. Wherefore, in such complicated cases, the most careful review of the antecedent course of life, constitution, circumstances, and the like, as well as very minute *inspection analysis* of every symptom, becomes necessary to come to a correct conclusion, and thereby to pursue a correct course of treatment. In the great majority of cases of chronic disease, in fact, which daily occur in civilized life, the original seat of disturbance may be identified in the digestive and nutritive functions, whence the progress of disease may be traced through the organic apparatus in which such functions are lodged to the centers of vital action and throughout the system.

Abstractedly, the primary disease consists—first of local increase of the natural irritability, that is of *irritation*, and afterwards, (when this irritation has expended itself in exhausting the natural irritability) of comparative deficiency of irritability, that is of *weakness or debility*, with susceptibility to irritation. But it is worthy of notice, that whilst this irritative process, at first purely *local and superficial*, has exhausted the vital energy of the particular organs in which it was first developed, it may (even without having possessed sufficient violence to alter the organic structure of such parts) have been conveyed through the medium of the communicative nerves to the center of sensation,—the Brain,—and consequently, also, to the mental and moral faculties:—to the center of motive impulse—the spinal cord; by regurgitation or other interference with the biliary discharge, or by nervous affinity, etc., to the liver, by insufficient or altered supply of material to the blood, through the channels of that fluid to the heart; and, owing to similar irregularities, as well as from the deteriorated condition of the center of the Nervous System to the lungs, the skin, and to the motory muscles of the frame.

It is, of course, understood, that the derangement of the stomach, of whatever description, may readily be communicated to the INTESTINES,

and that, more or less, the whole of the apparatus of nutrition and its appurtenances, are directly affected, and, in general, necessarily involved.

The just appreciation of these facts, pursued by the progressive disease, is of paramount importance, *because*, should affections be developed in one or more of these organs which occur sympathetically, and as the *result of primary* derangement of the stomach, it is needless to argue that a perfect cure (if yet possible) can *only be attained by attacking the original seat of disease*. The important observance of accessory measures, such as the appropriate diet, exercise, habits, and the like, may be materially qualified by the accurate discrimination of the original derangement. And inasmuch as the original character of functional derangement, or organic disease of the stomach, consists of an increase of the natural irritability, or of irritation, and the subsequent character consists of a morbid sensibility (whether there be increase or decrease of sensation) and of consequent susceptibility to irritation,—and as the recurrence of active irritation will, in each successive instance, subtract more from the vital energy, or sooner or later unhinge the organic structure, and do irreparable mischief,—it is sufficiently obvious, that in every disease which owes its origin to the stomach, any internal, external, or inducted cause of irritation will have a tendency to confirm the disease. Whence, it may be deduced that the accessory treatment *resolves itself in the most perfect avoidance of everything stimulating or irritating*, whether in the department of diet, in that which involves mental or corporeal exercise, or in that which affects the mind in its moral capacity, including all emotions, whether productive of immediate pleasure or pain. Everything which may tend to engender or sustain excitement of any kind, especially if it operate *suddenly*, should be strictly prohibited.

#### SYMPATHETIC AFFECTIONS OF OTHER FUNCTIONS OR ORGANS.

As the primary organs of digestion are readily and materially influenced by disturbances of the brain and its tissues, so in like manner do we as frequently find that the **BRAIN AND THE NERVOUS SYSTEM** in general sympathize immediately with the stomach, and are subject to the induction of derangement from that source, whether the primary cause affect merely the Lining Membrane, or the tributary Nerves:—or again, whether the disturbance in either case be merely functional (affecting the operation of such organs) or organic (affecting their substance). There is, however, some difference in these derivative sympathies, both as regards variation, intensity, and locality.

1. *Mental derangement* upon a given point, or general aberration of mind, extreme and restless *anxiety*, with visionary fears, or apprehension without foundation, alternation between extreme excitement and utter prostration or inaction, both of will and of impulse, indomitable pusillanimity, uncontrollable *irascibility* and excitability, morbid *impatience*, wretchedness with agitation, thoughts confined to self and generally clouded, unaccountable dread of undefined ills, conveying an intense inclination to engage actively in the investigation of such supposed misfortunes, fitful and capricious temper and disposition, and a highly suspicious disposition, etc., may be distinguished as an affection of the tributary Nerves of the apparatus of nutrition.

2. *Pains* in various parts of the head; *expansive*, darting, or spasmodic pains, of various descriptions and often indescribable, giddiness, the multitude of sensations of weakness, of heat or cold, of expansion or contraction, of trembling or uneasiness, convulsive and involuntary movements of particular limbs or muscles, local or general cramp or spasm, are also amongst those symptoms which may be traced to an affection of the tributary Nerves.

3. *Gradual* deterioration of nervous vitality amounting to palsy, and temporary or permanent loss of control by volition over the muscles of voluntary motion, owing to the *nervous* implication of the spinal cord, are attributable to a similar originating cause.

4. Sudden arrest of the functional operation of the brain, and torpidity, numbness, or suspended sensibility of the nervous structure,—locally or generally,—as well as dullness of thought, aversion to exercise of the mind or body, general torpor or indolence, listlessness, drowsiness, *depression of spirits*, characterized by constant stupor, sluggishness of the perceptive or reflective faculties, *vacancy*, *listlessness*, incapability of fixing the attention, *imbecility* without mania, confusion of ideas, irresolute, yielding and dependent (submissive) disposition,—which arise from determination or accumulation of the blood,—are associated with derangement of the (mucus) lining membranes.

5. *Pains* in the head, of a dull, obtuse description, pain in the fore-part of the head, sick-headache, numbness or dullness of the head, heaviness of the head, sensations of *smell*—whether pleasant or unpleasant,—which are merely morbid, deficiency, dullness, or suspension in the sense of smell, sensations of unnatural *tastes* in the mouth, and the like are, also associated with morbid condition of the lining membrane.

6. *Palsy*, occurring suddenly and without premonition, which is attributable to an oppressive accumulation of blood, is also amongst the affections of the nervous system, which are attributable to the same conditions as the last.

[When both portions of the nutritive organs are simultaneously affected, these results may appear in combination.]

THE LUNGS AND RESPIRATORY APPARATUS are liable to be organically affected by sympathy with the stomach, when the tributary nerves of the organs of nutrition are affected.

THE LIVER may be fitfully or occasionally implicated in the general derangement, resulting from such affection of the nerves of the stomach; but important functional or organic derangement of this organ is generally associated with disturbance of the stomach, consisting of morbid condition of the lining membrane.

THE HEART is, necessarily, more or less affected by both conditions of disturbance in the digestive apparatus, because in both is there either deficient, irregular, or morbid assimilation and distribution of the constituents of the blood.

1. *Accelerated action*, with, however, imperfect, incomplete, and irregular operation of the circulative process, with too abrupt, sudden contraction and, analogically, a spasmodic condition, characterized by quick, pointed

pulse; or, generally, identified by sudden flushes of heat or chills, is associated in the generality of cases with disturbance of the nerves of the stomach.

2. *Retarded action*, with, at the same time, the distribution of vitiated blood, or with deficient supply of the constituents of the blood, and, consequently, insufficiency of the volume of that fluid, generally characterized by a slow and tardy, but hard pulse, and attended with coldness of the extremities, and general deficiency of the animal heat, may usually be attributed to derangement existing in the lining membrane.

[When both portions of the nutritive organs are simultaneously affected these results may appear in combination.]

THE SKIN almost immediately sympathizes with the stomach when the slightest derangement occurs, being doubly susceptible of the effects of impaired circulation of blood, and of irregular nervous action or sensibility. Whether one or the other, or both portions of the organs of nutrition be affected, and, whether functionally or organically, the skin manifests its immediate sympathy, either in sensation, appearance, feeling to the touch, or all three.

1. Extreme susceptibility to sensation of cold (or *chills*,) is more or less associated with every variety of derangement of the stomach.

2. Sensations of pricking, tingling, crawling, shuddering, itching or irritation, *burning* (flushes of heat), with redness, further characterized by the appearance of marked spots, pimples, and other eruptions, etc., are generally associated with derangement of the nerves of the stomach.

3. *Turgid*, sallow, dirty hue of the skin, without loss of softness, moisture, or elasticity, though usually associated with derangement whose seat is in the lining membrane, may be observed in both varieties.

4. *Flaccid* or withered, or deadened skin, having the appearance of parchement, with general deficiency of sensation, though usually attributable to the continuance of derangement of the membrane, may also be identified in cases in which every other indication identifies the nerves of the stomach as the seat of the affection.

5. *Dryness* of the skin may be associated with derangement, whether functional or organic, of either portion of the apparatus of nutrition.

THE EYES AND SIGHT readily sympathize with the stomach, owing to the uninterrupted continuity of the mucus membrane of the various passages to that which comes into contact with the external portions of the eye. Whence *watery eyes*, dark appearance around the eyes, redness of the edges and inner surfaces, or swelling of the eyelids, bloodshot eyes, glutinous discharge from the eyes (adhesive gum), which occur as manifestations of irritation or accumulation of blood about the membranous surfaces—extending along such membranous surfaces from those of the stomach,—may generally be associated with disturbance of the lining mucous membrane.

1. Even *blindness*, from palsy of the nerve of sight, is generally dependent upon pressure occasioned by similar local accumulation of blood, and is, therefore, associated with a similar cause; although, in some cases,



it may result from affections of the *nerves* of the stomach. The association of other symptoms will be distinctive in such cases.

THE EARS AND HEARING are also most frequently affected by irritation, accumulation of blood, or dryness (deficiency of wax) extending to these organs from the lining membrane of the stomach. It is, however, obvious that excessively acute hearing, or total deafness, etc., might result from affection of the nerves acting sympathetically on the brain.

2. *Excessive dryness* of the ears, sometimes characterized by increased sensibility of the organ of hearing, and sometimes by sensation of heat, or by burning pain, is usually attributable to derangement of the lining membrane of the stomach; and the same may be said of a sensation as if the ears were muffled, a deadness of sound, the internal passages being swollen, and the orifice being, consequently, lessened.

#### DISTINCTIVE CLASSIFICATION OF VARIETIES.

It is apparent from the foregoing remarks, that we should distinguish five modifications of that form of disease which is popularly termed indigestion or dyspepsia; namely—

1. That which is merely functional, or which consists in irregularity in the operation of the organ involved.

2. That which is organic, or which consists in some change in the structure of the organ affected.

3. That which affects the lining membrane of the organ—which is at first evidently superficial, and is generally conveyed to contiguous organs by the irritation extending along the uninterrupted surface of the membrane—but which, inasmuch as it embraces the extremities of the nerves, may sooner or later become complicated with—

4. That which is seated in the tributary nerves of the organs of nutrition—which may therefore be conveyed directly to the substances of the brain and spinal cord, through the medium of the nerves which are in direct communication with these concentrating points, and from which we may anticipate a more immediate development of sympathetic manifestations in the nervous system generally.

5. That in which the nerves and membrane are both implicated.

The third and fourth distinctive varieties are those which require the most particular investigation; not only because they may or may not involve the first two, but, more particularly, because, whether the disease be organic or merely functional, the distinction between the nervous and membranous varieties will afford the real clue to, or at all events materially facilitate, the treatment.

The initiatory condition both of nervous and of membranous derangement of the stomach is the same; it consists in determination and accumulation of inactive blood in the vessels associated with the tributary nerves, on the one hand, or in those connected with the lining membrane on the other. In both cases, the first unnatural condition is increase of the natural irritability—that is, irritation—respectively of the portion affected; and in both cases the exciting cause is something which impedes or unduly hurries the natural operation, and consequently excites an irritative effort in the organ either to repel the matter which oppresses or

disturbs it, or to fulfil its functions with that degree of acceleration to which it is impelled.

Disturbance or oppression of the functions of the tributary nerves may therefore be occasioned (chiefly) either: 1. By the reception of irritating, stimulating, or indigestible substances into the stomach. 2. By *superabundance* of food, however plain and digestible, too suddenly crammed into the stomach. 3. By the imperfect preparation of the food (by mastication, etc.) before it is conveyed to the stomach. 4. By over-exertion of the *mental* faculties of the brain, which operates directly to the medium of the communicating nerves. 5. By sudden depression or excitement of the *moral* faculties of the brain (as by passions or emotions conveying pleasure or pain.) 6. By *deficiency* of physical muscular action (as in sedentary habits), whereby the evacuation of matters rejected (secreted) from the nutritive apparatus is impeded, and whereby, therefore, the organs whose function consists in the appropriation of the aliment and the expulsion of the residue are opposed with the latter, which gives rise to an irritative effort to expel the obnoxious matters. 7. By *excess* of physical muscular action, which compels the organs of nutrition to make an undue effort for the supply of the necessary sustenance over and above what is ordinarily required. 8. By the abstraction or undue discharge of animal fluids (such as blood, sweat, etc.) which equally renders an undue effort necessary for the supply of the deficiency. 9. Generally—by irregularity of habits, or by deviation from habitual method, whereby the organs of nutrition are either checked or accelerated, or otherwise compelled to provide for the disturbed balance between the tributary functions and the vital energy to which they are subservient. 10. By external influences (such as cold, heat, etc.) whereby the circulating and secreted fluids are either too quickly absorbed or dispersed, etc., or, on the other hand, are arrested or suspended in their progress, and consequently driven back upon the secreting organs, or left to impede the channels through which the successive course of secretions, etc., should be circulated or dispersed. 11. Which may be superadded to the foregoing general causes—by abuse of bitter tonics, sal-volatile, sedatives generally, opium, iodine, and *mercury*, as also by depletive measures in nervous fevers—all of common occurrence.

Respecting disturbance or oppression of the functions of the lining membrane; it may be said in general that the conditions 1, 2, 3, 6, 7, 8, 9, and 10, just mentioned, operate as exciting causes; but that conditions 4 and 5 more rarely (if ever) operate as *direct* exciting causes. A twelfth class of causes may, however, be added with regard to this variety; namely—12. By abuse of arsenic and other mineral tonics, and still more frequently of saline purgative medicines.

Respecting disturbance implicating both the nerves and the membranes, it will readily be distinguished that any or all of the conditions above mentioned may operate as exciting causes.

#### GENERAL SYMPTOMS EXHIBITED BY IRRITATION, ETC., OF THE LINING OR MUCOUS MEMBRANE.

This variety of the disorder is more apt to be developed at the stage of maturity, or within the period of life which is termed middle age;

and in general, individuals who are little susceptible of excitement, whose sensations are not acute, and whose temper is even, or whose disposition is indolent or listless, are more likely to become thus affected. Distinctively it consists of tardy, insufficient, or oppressed functional operation, and of inactive accumulation of blood in various parts. The first characteristic manifestation which springs from it is *Acidity*—usually, however, attended with little pain; regurgitation of food, insipid or acrid risings in the gullet, and heartburn; occasionally *nausea*, but more rarely vomiting; habitual *deficiency* of appetite; habitual or continued predominance of *thirst*, especially in obstinate and continuous cases; dryness of the mouth and throat from deficiency of saliva, or thick, adhesive saliva or phlegm in the mouth; bitter sweet, or salt taste in the mouth;—or, again, insipid, clammy, or metallic taste; extreme susceptibility to change of temperature and weather, affecting the throat and nostrils, and consequently to *relaxed* or inflammatory *sore-throat*, or to cold in the head, excessive discharge from the nostrils, or continual dryness or itching in the nose, with or without altered or *diminished* sensation of *smell*; *offensive breath*, internal dryness with heat of the ears and acuteness of hearing, or internal swelling with impeded hearing; *humming or buzzing in the ears*; red suffusion of the eyes and bleared appearance, especially on waking in the morning; dark rim around the eyes, with redness and swelling of the inner side and margin of the eyelids; *watering of the eyes*; oscillation as of fluctuating vapors before the sight; flashes of light or appearance of sparks before the eyes; dark shade as of clouds or flickering of black spots before the eyes; adhesion of the eyelids—especially on waking in the morning; yellowish or waxy appearance of the eyelids—with glutinous matter; in recent or casual cases, and when the affection is neither severe nor inveterate, the *tongue* may be flabby or coated with a brownish-white fur, but neither very dry nor enlarged; in cases in which the liver and first portion of the intestinal tube are affected, the *tongue* will generally be coated in the center with a yellowish fur, somewhat dry, the tip and margins being of a bright-red color and free from fur; in cases in which the affection is confined to the stomach, but is of a severe character and of long standing, the tongue will usually be covered in the center with a slimy fur, the margins and extremity being in this state also free from fur, and exhibiting *bright redness*; in cases in which the nerves of the stomach are *also* implicated, and in which the irritation of both portions is of a most severe and inveterate character, the tongue will usually be *enlarged*, and will exhibit a glistening, white, and thin coating in the center, the margins and extremity being free from fur and of a bright-red hue;—or, again, it may be so much swollen as to become indented along the lateral margins by the impression of the teeth; progressive decay of the teeth; *constant* or casual toothache or predisposition to toothache; accumulation of brownish and offensive *matter* on the *teeth*; yellowness, blackness, or other discoloration of the teeth; offensive exhalation from the *gums*; *soreness* or tenderness of the gums; unhealthy and spongy puffiness, or redness and swelling of the gums; the gums bleed spontaneously, or are *easily provoked to bleed*; unhealthy and spongy puffiness or excessive redness and swelling of the lips, usually indicative of recent affection—when associated with such symptoms as identify the

*Lining Membrane* as the seat of disease, but occurring irrespective of degree and length of continuance when associated with such symptoms as identify the *Nerves* as the seat of disease;—*scaliness of the lips*; in cases in which the liver and first portion of the intestines are implicated in the derangement, we may notice the *mottled appearance* of the lips; in similar cases of longer standing, and of the most inveterate and incorrigible character,—especially if continual excess in the use of fermented liquors, and particularly of ardent spirits, has been the exciting cause of disease,—sallow whiteness; and hardness of the lips may be exhibited, or what has been oppositely described as a *waxy appearance*; pressive headache, seated in the anterior part of the head, or what is called *sickheadache*; dull or intense, fixed, aching pains in the head, with sensation of confusion, heaviness, and sometimes, also, with giddiness or numbness; general uneasy sensations about the head, or as if the contents were expanded; determination of blood to the brain, and sudden attacks of apoplexy without premonitory symptoms; dullness and confusion of thought; general dullness of sensation; tardiness of perception, reflection and motion; vacaney and incapability of fixing the attention for any length of time; drowsiness, or even lethargy, general indolence, and inaction, or even torpor of mind and body; excessive reluctance to move or exert one's-self in any way; deep depression of spirits, with *listlessness*; deficient vigor of will and consequent irresolution and indecision; *hard but tardy pulse*, generally also decreased in frequency; unhealthy puffiness of the body, morbid accumulation of fat; flabby skin, muddy sallow complexion; and in severe and obstinate cases, chippy deadened, parchment-like skin; inaction, or even torpor of the bowels, and, therefore, suspension of evacuation, slow, tardy evacuations, or evacuated matters *paler* than in health; habitual constipation.

#### GENERAL SYMPTOMS EXHIBITED BY IRRITATION OF THE NERVES.

This variety of the disorder is more apt to be developed amongst females and young persons; and, in general, individuals of acute sensibility, of *active, restless habits*, of quick impulses, excitable and irritable disposition, and choleric temperament, and of spare, wiry frames, are not liable to be thus affected. Distinctively it consists of inordinate, irregular functional operation resulting in defect in the distribution of blood, or even of the quality of the blood distributed. The first characteristic manifestation which springs from it is *Flatulency*, this variety of the disorder being also characterized by the multiplied development of *pain* and painful or otherwise acute sensations,—or, in the worst and incurable cases of organic disorder, *total suspension of pain*, which has previously been acute, and of which the cause is not removed; intense and pressive pain at the lower part of the chest, sometimes extending through the body; wrenching gnawing pain at the pit of the stomach; sinking at the stomach; heart burn very predominant; nausea, and generally vomiting; irregular, fitful, capricious appetite, either inordinately voracious and *insatiable* or very deficient, or more generally *greater than in health*, but sometimes also, in very severe cases, totally suspended; *eating* provokes or, aggravates the suffering; stimulants, and even hot plain drinks have the same effect; *eructations* and hiccough, and in fact, all mani-



festations of spasmodic contraction of the muscles, connected with and operating upon the stomach;—consequently, general *spasm of the stomach*; *thirst* usually *absent*, occurs fitfully or irregularly, but sometimes of excessive *temporary intensity*;—morbid taste in the mouth, chiefly the *metallic*; thin, acrid saliva; fitful or *periodical* pains in the teeth, of the most intense and distressing description; lips habitually of an over-vivid redness, or spongy; morbid acuteness of the senses of smell and hearing; occasional darting, fugitive or distracting pains in the cavity of the ear and deep in the head; the tongue generally free from coating, but of a bright red, fiery hue; in cases which are of recent occurrence there will not usually be either swelling or dryness of the tongue, but the extremity will exhibit a species of roughness from papillary elevations; in more severe and old-established cases, the redness of the tongue will be further qualified by *dryness* and *glistening* appearance (glossy surface); in cases in which the intensity of the irritation may have become complicated with sympathetic affection of the brain, the redness of the tongue will be further qualified by *general swelling*, and sometimes, also, by a slight degree of white coating,—not sufficient, however, to conceal the characteristic redness of the surface beneath; the tongue much swollen, and deeply *intersected with fissures*, indicates a very serious advancement of the disorder; the swollen tongue, with a bright, glistening, white surface, (whereby is conveyed a distinct indication of severe sympathetic affection of the brain, as in highly hypocondriacal subjects, especially those who have been treated with large doses of Mercury); the co-existence of both varieties of the disorder of considerable duration is evinced in the swollen tongue, of which the margins and extremity are red, but the center is slightly covered with a glistening white coating; the tongue *quivers* on protrusion (whereby is identified a sympathetic affection of the spinal cord). The change from vivid redness, with or without swelling, but without coating, to brownish hue and more or less thick coating implies a modification of the disorder, or progress towards cure. In general, moreover, we may notice every variety of hysterical or hypocondriacal excitement; unaccountable uneasiness and restlessness; sudden fits of laughter, or the contrary,—the one terminating in, or alternating with, the other, apparently without a cause, or provoked by very slight causes; sudden starting or shuddering; incessant tossing about or moving from place to place; general or local convulsive movements of every description,—such as trembling, jerking of the limbs, *coughing*; convulsive cough, difficult respiration, and sensation as of a ball rising in the throat; cramps in muscular parts; chattering of the teeth, or clenching of the hands and teeth, or *grinding of the teeth during sleep*; an interminable variety of erroneous impressions, upon which the mind harps with persistency, and which appear to haunt the patient more painfully at stated periods; intense and restless anxiety about one's self, one's affairs, one's *health*, with impulses even to self-destruction; extraordinary *exaggeration* of every feeling; intense sensitiveness of temper and disposition; intense impatience, not only of contradiction, disappointment, vexation or pain, but even of one's own moral feelings; excessive irascibility and excitability; temporary suspension of control over the muscles of voluntary motion; sudden local and temporary paralysis; apoplexy; pains in the

head, of various descriptions—giddiness, sensation of weakness in the head; *tiedouloureux* or nerve-pain in the face, etc.; pains on one side of the head; darting pains starting from one point and piercing the head in every direction; pains of the back of the head; darting pains in the eye-balls; pains which seem to run from one extremity of the body to the other, leaving an indiscrible sensation after them; *palpitation of the heart*; quick, and sometimes small and frequent pulse; anxiety and oppression of the chest; flushes of heat, with patchy, circumscribed, or suffused redness; crawling, pricking sensations in the skin; redness and swelling of the gums and lips; spare, meagre, or even withered frame; great deficiency of flesh; scanty and wiry flesh; irregular operation of the bowels, both as to the frequency and the nature of the motions, which vary in color and consistency.

#### GENERAL SYMPTOMS OF COMBINED DERANGEMENTS OF THE NERVES AND MEMBRANES.

These will obviously consist of a combination of symptoms associated with each variety in its distinctive form, and will, therefore, need no further description.

#### ALLOPATHIC TREATMENT.

This is one of the diseases in which the patient ought to give but little thought to his trouble, and every one guided only by the advice of his physician. Indeed it might be better, if a single line upon this subject had never been written for a popular work, because they direct the imagination of the subject to his disease in a way that creates such a state of mind which tends to prolong the trouble. All fears which the patient expresses, probably proceed from the condition of the body and don't indicate a disordered mind. They should be submitted promptly to the physician in whom he has most confidence, who will doubtless be able to trace them to the cause suggested. Exemption from inconvenience, with the mind pleasantly occupied during eating and digestion, as is the case when in agreeable company, frequently enables the patient to indulge the appetite freely without inconvenience, but when they dine alone they experience trouble during or after the meal. In the latter case they watch carefully the sensations of digestion, while in the former case the diversion of the mind causes the unpleasant experiences to disappear. Good cheer and a good moral are valuable both in the way of prevention and cure of dyspepsia.

As to diet, there is no doubt that when the dyspepsia succeeds overindulgence of the appetite, one of the first things to be done is to give the stomach rest for a time, by abstaining from food or by taking less than the patient requires. The period to which this is appropriate is of short duration, and must not be continued long enough for the system to become reduced. This abstinence may, of itself, become a cause of dyspepsia, as is the case when persons attempt to live on as little and as coarse food as possible.

The food should be simple, but nutritious, and taken in ample quantity and variety. Often it is an object of treatment to overcome the erroneous idea, that various healthy articles of food do not agree with

him. Food which is wholesome for most people cannot be harmful for any. It is often said that "what is one man's meat is another's poison," but there is scarcely a maxim which is more generally untrue. Almost all cases of dyspepsia can and should conform to the ordinary rules of diet, and not to any particular rules. He should take, from time to time, any and all articles of wholesome food, and aim to eat like a well person without the need of selecting food to suit his particular case. In most cases of dyspepsia lean meat is digested the best, especially from mature fat animals. They should be plainly but well cooked, never fried. Sometimes milk with starchy articles of food, such as bread, rice and the like agree best. Doubtless milk is not healthy when taken on a full stomach, in large quantities, but if taken with the understanding that it is hearty food, it will almost never disagree. Bread to be in its best condition should be in that state between fresh and stale. Cornmeal, oatmeal, and cracked wheat or Graham mush, and boiled rice are easily digested. Ripe fruits partaken of moderately are beneficial. Pastries, rich puddings and sweetmeats are inappropriate.

The kind of food most appropriate will vary, as it is found that the digestive derangement is in the stomach or intestines. If in the former, starchy articles and fat will agree best, but if in the latter, meats, eggs, and milk will be found most appropriate.

The habits regarding eating should be *regular*, but at the same time the dyspeptic ought never to go hungry. If no breakfast or an insufficient one has been taken, a lunch in the early part of the day is desirable. His most hearty meal should be at an hour that can be followed by leisure and recreation. A little food often had better be taken before retiring at night. No one ought to go to bed hungry. Hearty indulgence of the appetite is not to be permitted, but moderation is to be practiced until the digestive powers increase, when food may be taken in larger quantities. Only a moderate amount of liquid should be taken at the meals, but may be freely taken between meals.

Regular habits of life, early hours, plenty of sleep and such changes in the occupation as will secure sufficient bodily exercise and relieve from harrassing care and troubles of business, a rest of one day in seven, horse-back riding, a daily cool or tepid sponge bath and abandoning the use of tobacco and alcohol will cure most cases of dyspepsia.

It is a common, and truthful saying in the main, that exercise will cure dyspepsia, but if taken simply for exercise it becomes neglected and tends to keep the mind of the patient on his disorder which is harmful. It is, therefore, desirable that the mind of the patient may be turned from his dyspeptic trouble, that he adopt such a mode of life as will of itself require a requisite amount of exercise in the open air. Most, if not all, these requisites are secured by an overland tour in our own country and mountains, or by foreign travel.

I believe exercise never should be carried to the point of exhaustion, but should be sufficient to have earned a good sleep of eight hours at night.

The benefit which can be derived from medicines is secondary, but important. The uneasiness of the stomach may sometimes be relieved

by a counter-irritant over the stomach as a small blister, or rubbing the skin with a liniment made of equal parts of Ammonia water (hartshorn) Turpentine and Olive Oil, or a couple of drams each of Croton Oil, Turpentine, and Olive Oil.

If the blood is impoverished, and the appetite is poor, bitter infusions (teas), made of Columbo Gentian. Cinchonia Bark, or Quassa, etc., in the strength of one ounce of the crude (dry) drug to the pint of hot water.

*Dose:* Two or three tablepoonsful before eating.

The Tincture Muriate of Iron may be given in doses of fifteen drops in sweetened water, after eating. The Citrate of Iron and Quinine, in doses of three to five grains, in solution, in water or syrup, almost always answers the same purpose as both the foregoing.

Digestion is often greatly helped by the use of Lactic or Hydrochloric Acids and Pepsin.

A good formula is this: Take of Glycerole of Pepsin three ounces, Lactic Acid an ounce. Mix, and give a teaspoonful after each meal. If Iron is required, half a dram Lactate of Iron can be added to this mixture. In case the Hydrochloric Acid is used, if Iron is also given, it should be the Muriate Tincture of Iron. In case of acidity and heart-burn, the acid mixture should be given before meals instead of after.

Should this not relieve, Bismuth, in doses of fifteen or twenty grains, with a little baking soda, or salaratus, may be given after meals upon the development of this symptom.

Flatulence and wind in the intestines is best relieved by the continued use of Nux-vomica. Ten drops of the Tincture of Nux-vomica, in water, or a quarter of a grain of the Extract in pill, may be given three times a day.

In extreme instances, when everything is vomited, the so called milk cure is often appropriate. In its use all other food is omitted. A couple of tablepoonsful, with lime-water, is given every three hours during the day, and the quantity gradually increased until the invalid can take one or two tablepoonsful four times a day. One or two quarts is generally the amount that can be taken in the day. It is best given a little warm. The quantity of lime-water should be one-fourth that of the milk. If necessary, the milk can be flavored with a little coffee. Other useful procedures are counter-irritation, as above suggested, a drop of Creosote, in water, after each act of vomiting. Bismuth and Nux-vomica, also, as above directed, etc.

It is probable the length of this article is already too great for the good of the dyspeptic, because it induces him to study and brood over his case. He is best off under the direction of an intelligent, regular physician.

#### HOMOEOPATHIC TREATMENT.

NUX-VOMICA is particularly applicable to the treatment of indigestion in *hypochondriacal* subjects. It covers the following symptoms, either when they have arisen in consequence of sedentary habits, excessive mental exertion, or long watching, or of *overloading* the stomach, of excessive draughts of milk, or even of water, or of eating or drinking acid things, or of using spices and seasoning to excess; or, again, in cases in



which *all food or drink*, however plain, light, and digestible, provokes indigestion; or from the abuse of coffee, tobacco, wine or ardent spirits; or, again, when the irregularity of digestion has been induced or confirmed by loss of animal fluids (profuse sweating, bleeding, and the like), or by habitual recourse to aperients; *the head confused*, with, occasionally, a *feeling* as if resulting from *intoxication*, and *giddiness*, with sensation of turning and wavering of the brain; headache, unfitting for, and increased by, mental exertion; tearing, drawing, or jerking pains in the head or cheeks, and pulsative pains, and a sensation as if *a nail were driven into the brain*; congestion of blood to the head, with humming in the ears. The headaches are often deeply seated in the brain, or in the back part of the head, frequently confined to one side, or over the eyes, and at the root of the nose, coming on chiefly in the morning, after a meal, or in the open air. Yellowness of the lower part of the white of the eyes, with a mist before them; a sensation as if one were about to fall; sparks, or small gray or black spots before the eyes; short-sightedness; *pale* or *yellowish* color, or redness of the face, especially about the mouth and nose; frequent headache, and impaired powers of digestion, with insipidity of food; foul, *dry*, *white* or yellowish tongue; vivid redness of the margins of the tongue; *thirst*, with water-brash particularly after acids or rich food; accumulation of slimy *phlegm* or water in the mouth; metallic, salt sulphurous, herbaceous, *bitter*, *sour*, *sweetish* or *putrid* taste, chiefly in the morning, or after meals; *bitter eructations*, or continued *nausea*, especially after *meals*, or even after drinking cold water or milk—on going into the open air after a meal, or after partaking of acids; heartburn, hiccough, acidity, flatulence, frequent and violent vomiting of food, phlegm, or bile, ineffectual efforts to vomit; *distension and fullness* in the region of the stomach, with excessive tenderness to the touch; a feeling of tightness of the clothes round the upper part of the waist; *cramps of the stomach*; *constipation*; reddish urine, with brickdust-colored sediment; sleep, unrefreshing and restless, either from suffering or otherwise, with disagreeable dreams, and drowsiness in the morning; tendency to exacerbation of symptoms during the prevalence of a northerly or easterly wind, or when the atmosphere is loaded with vapor; better after warm food.

One of the most distinctive indications for the employment of this remedy, in preference to the next mentioned, is the temperament, which is restless, irritable, lively and choleric. A disposition to piles is also a good indication.

*Dose:* Three globules in a teaspoonful of water, night and morning, for a week; then pause four days, resuming the same remedy in a similar course, or suspending treatment, or proceeding with another medicine, according to the circumstances which are present.

COCULUS is appropriate to the treatment of highly bilious subjects, or when the derangement can be traced, however remotely, to long watching or intense application to study; or when coffee, tobacco, or brandy, can be traced as the exciting cause. It may generally be employed in cases in which moroseness and hypochondriacal disposition are marked characteristics either before, after, or in alternation with *Nux-c.*,

according as the characteristic effects of the one or both most clearly correspond with the case.

*Dose:* Three globules in a teaspoonful of water every twelve hours, until amelioration or change. Or if, again, *Cocculus* be apparently inadequate to complete the cure, consider the next remedy.

*CARBO-VEG.* is especially appropriate to the treatment of derangements of this nature occurring amongst persons of *advanced years*; or when the derangements can be distinctly traced to long watching, to abuse of wine, of ardent spirits, of coffee, to milk diet or casual use of milk, to excessive use of butter, or to rancid butter, to fat and greasy things, such as pork, to fish, especially if tainted, or to shell-fish in particular, to *flatulent* vegetables, etc., to pastry or acid things, to excessive use of salt, or unguarded use of ices or very cold drinks. This remedy is particularly indicated by excessive and constant *flatulence*, with heavy respiration, repugnance to animal food, or especially to fat or greasy things, or to milk, and when *acidity* is constantly provoked by such food; *bitter* taste in the month; accumulation of phlegm in the gullet and stomach, frequent empty, sour, or bitter eructations, etc.

*Dose:* Three globules in a tablespoonful of water every twelve hours.

*PULSATILLA* is indicated by a series of symptoms very analogous to those which have been enumerated under the head of *Nux-c.*, but with this distinction, that it is particularly adapted for females generally (*especially for hysterical subjects*), children, individuals with light hair, and a marked predisposition to purulent exudations at the edge of the eyelids, or to styes, and for mild or phlegmatic dispositions. Under such conditions it is appropriate to the treatment of derangements of the stomach occasioned by excessive application to study, *overloading* the stomach, abuse of wine, spirits, beer, coffee, or rich chocolate, by excessive draughts of milk, or even of water, by *new, slack-baked*, or otherwise unwholesome bread, or butter, fat or greasy things, *tainted* or *unwholesome meat* (pork especially), by eating *oysters* or *tainted fish* of any kind, by pastry, flatulent vegetables, fruits, or by ice cream; or even when an external injury (*as a strain*) has been the exciting cause of the ailment. Amongst its characteristic indications, we more frequently find a *want* of thirst, than thirst; a repugnance to fat and rich meat, and *suffering* after *taking pork or pastry*; general chilliness, or great difficulty in keeping the hands and feet sufficiently warm; deficient sense of smell, sometimes accompanied by increased secretion from the nostrils; frequent and loose, or difficult and loose, or sluggish evacuations; hypochondriasis, and convulsive fits of laughing and crying.

*Dose:* Three globules as directed for *Nux-c.*

*IGNATIA* may in some cases be employed twelve hours after the fourth dose of *Pulsatilla*, if the latter has failed in affording permanent relief, and does not promise to complete the cure. It may also, in some cases, be employed before or instead of *Pulsatilla*, when there is a tendency to alternations of exuberant and depressed spirits, or particularly if grief be associated with the derangement. *Ignatia* is also appropriate for the treatment of derangements of digestion occurring amongst highly hys-

terical females; or of cases which result from abuse of coffee, beer, brandy (or even ardent spirits in general), milk, sweet things, or tobacco.

*Dose:* Three globules in a teaspoonful of water three times a day.

BRYONIA is often appropriate to the treatment of derangements of the stomach, associated *either* with a hypochondriacal or hysterical disposition, or with *habitually* sedentary habits; or when occasioned by *depressing emotions*, by chocolate, milk, new or slack-baked bread, *tainted sausage-meat*, flatulent fruit or vegetables, or *pastry*: the indicative symptoms are as follow: Headache, *burning* or *expansive*, particularly after drinking, attended with bewilderment of the head and giddiness; TONGUE glazed, dry, and red, or covered with a whity-yellow fur; sometimes the aversion to food is so strong, that the patient cannot bear the smell of it; loss of appetite, alternately with unnatural hunger; craving for acid drinks; great thirst; *insipid*, *clammy*, putrid, sweetish, or bitter taste in the mouth; ACIDITY and FLATULENCE, or *bitter risings* after every meal, or after partaking of milk. HICCUGH, nausea, water-brash, *vomiting of food* or bile, particularly at night; tenderness, in the region of the stomach, to the touch, sensation of swelling in the pit of the stomach, especially after a meal, or on walking; *sensation of burning* in the pit of the stomach, especially when *moving*. Constipation, temper, restlessness, irascible and obstinate; also when want of exercise or anger are frequently the exciting causes of the derangement, or the means of aggravating the indigestion. The indigestion is more apt to manifest itself in summer, or in damp weather, with a northerly or easterly wind, and is frequently accompanied with chilliness.

*Dose:* Three globules in a teaspoonful of water, every twelve hours, until amelioration or change. In cases in which the sufferings are very great, the like dose should be repeated every three hours during the attack, until the symptoms subside or change.

RHUS-TOX., which is particularly appropriate for the treatment of indigestion resulting from *mechanical injuries* (such as a *strain*), or when *beer*, spirits, coffee, milk, copious draughts of *cold water* when *heated*, new or slack-baked bread, tainted sausage-meat or *fish* (especially shell-fish, as *muscles*), may directly have provoked the attack. The specific symptoms are as follows: Flat, sticky, sweetish, or bitter, or foul taste in the mouth; *drowsiness*, *eructations*, and sensation of *fullness*, languor or giddiness, *after eating*: a sensation of repugnance to food, especially to meat, bread, etc., or sensation of *satiety*: or want of appetite, with hankering after dainties; *continual, empty, painful and noisy eructations*: offensive and very abundant flatulency; the derangements of the digestive functions more apparent and troublesome at night; distension and pressure in the region of the stomach. Extreme depression of spirits, despondency, insuperable anxiety and uneasiness respecting affairs.

*Dose:* Three globules in a teaspoonful of water every four hours, until the symptoms are modified,—and then every twelve hours, until positive change.

NATRUM-M. is particularly appropriate to the treatment of *chronic cases* occurring amongst hypochondriacal subjects, or, sometimes, of preg-

nant females; or when habitual excess in the use of fermented liquors has been the chief cause of derangement; or when milk diet, mineral waters of particular localities (unless brackish), or the water of hard springs and mountain streams,—or unwholesome bread, or fat and greasy food (especially pork),—or excess in the use of fruit or tobacco, may be distinguished as associated with the origin of the affection. *Natrum-m.* is generally useful in such obstinate chronic cases as have resisted the operation of *Bryonia*, *Nux vomica*, etc., and which are characterized by frequent attacks of morning sickness, or by heartburn after every meal, water-brash, constant nausea, occasional sensations of faintness, pressure in the stomach, or *intractable humor* after eating, and obstinate costiveness, or when milk, and liquids in general, invariably disagree.

*Dose:* Six globules in a tablespoonful of water, every morning, the first thing (fasting), for ten days (unless earlier improvement ensues), then pause four days, resuming the same course, if necessary, and so on.

KALI-BICH. is particularly applicable to the treatment of chronic cases in which milk, bread, fish, or pastry, constantly disagree with the patient. The distinctive symptoms are as follows:

Indigestion, with aggravation of symptoms in the morning and during movement, relieved after eating (sometimes, however, a distressing feeling of weight is experienced after a meal); mouth and tongue dry; thick yellow fur on the tongue; conflux of water in the mouth; metallic, acid taste; want of appetite; nausea, flatulence, frequently accompanied by colic. Constipation or hard stools, attended with straining and burning in the outlet; alterations of hard and relaxed motions, great sensibility to cold air, complications with affections of the liver and spleen; extreme depression of spirits, hysterics.

*Dose:* As directed for *Natrum-m.*

CHAMOMILLA is of great service in some derangements resulting from or associated with excess in the use of *coffee* or of *sweet things*; or more especially depressing emotions, such as vexation, disappointment, a *fit of passion*, and the like; or, again, if the derangement has been provoked by check of perspiration. The characterizing symptoms are as follows:

Headache, with, sometimes, *semi-lateral* pulling, shooting, fullness, and beating in the head; *giddiness* and *staggering* in the morning when getting up; oppressive heaviness, swimming in the head, and sensation of a bruise; *headache, felt sometimes during sleep*, with obscuration of the EYES, and yellow color of the whites; TONGUE dry and cracked, with a thick and yellowish coating; mouth dry, with occasional presence of frothy phlegm; *excessive thirst and desire for cold drink*; *bitter taste* of the mouth and of food; want of appetite and dislike to food. ACIDITY or sour risings, regurgitation of food, nausea, vomiting of food, phlegm and *bile*; *oppressive pain in the region of the heart*, distention at the pit of the stomach and upper part of the waist, chiefly after eating and at night, attended with inquietude and terror; burning pain in the pit of the stomach; uneasiness, and feeling of sinking in the stomach; CRAMPS IN THE STOMACH, especially when traceable to coffee; sometimes constipation, but generally *relaxation of the bowels*.



*Dose:* In casual cases, of a solution of six globules to three table-spoonful of water, give a teaspoonful every three hours, until amelioration or change. In chronic cases, three globules in a teaspoonful of water night and morning, until similar variation occurs.

IPECACUANA is available for the treatment of indigestion occurring amongst children and pregnant females, or when occasioned by *overloading* the stomach, imperfect mastication of food, hurried and voracious feeding, or by irregularity of meals, or by abuse of tobacco, or even of coffee; or in cases in which *veal* or other *young meat* particularly disagrees; or when cold, nervous excitement, late hours, or over-application to study in particular, are to be traced as the exciting causes of derangement. The distinctive symptoms are: Pale face and yellowish; tongue sometimes clean, at others coated white or yellow; aversion to food, and particularly to fat or rich indigestible food, such as pork, pastry, etc., or suffering from indigestion on partaking of such; vomiting of drink, food, phlegm or bile, sometimes after a meal; retching, easy vomiting, generally attended with coldness of the face and extremities, and sometimes alternation with watery looseness of the bowels, feeling of emptiness and flaccidity, and sensation of sinking at the stomach. Headaches attended with nausea and vomiting; shooting pains, with heaviness and painful pressure on the forehead.

*Dose:* Against the acute symptoms when present, of a solution of eight globules to a wineglassful of water, give a teaspoonful every hour, until amelioration or change; against the chronic aspect of the affection, that is, the recurrence of the acute symptoms, give three globules in a teaspoonful of water, night and morning until distinct change.

CHINA is appropriate to the treatment of derangements of this kind, according to the subjoined indications, when occurring in aged persons, or in patients of a hypochondriacal disposition, particularly if the loss of animal fluids, or *mental affliction*, be distinguishable as the predisposing cause, or when the suffering can be attributed to overloading the stomach, to excessive indulgence in *strong tea*, or, in some cases, to abuse of spirituous liquors or coffee, to milk diet, or to unguarded or too copious draughts of water; or, again, when bread, butter, fat and greasy things generally, disagree, or when tainted fish has been the immediate cause of derangement; or, again, if the symptoms can be traced to flatulent food, over-indulgence in fruit or spices and other seasoning, or, in some cases, to tobacco; or, again, when every kind of food provokes an attack. This remedy is a valuable auxiliary in the treatment of this derangement, when there is impaired appetite with great weakness of digestion, which is more liable to be experienced on partaking of supper; flatulence, bitter taste, languor, hypochondriacal disposition, and particularly when we can trace the affection to debilitating losses of fluids, such as the abstraction or loss of blood, too great a drain upon the resources when nursing, prolonged use of aperient medicines, etc., also in disorders arising from the abuse of tea, or from a residence in impure atmospheres, especially such as are overloaded with the exhalations of decayed vegetable matter, where the drainage is insufficient, the cultivation imperfect, where stagnant pools or ditches, charged with rank matters, abound, more particu-

larly in the midst or vicinity of *half-dried* marshes, or on a level with them, or in such position in relation to them as exposes the habitation to the current of prevalent winds from them, or near the beds of periodical streams, when the water ceases to flow, and the bed appears to be dried up (especially in warm climates), or when the rays of the sun have great power; or, again, in districts which are habitually dry and well drained, but which have been extraordinarily saturated by a wet season, and are beginning to dry up again.

*Dose:* Six globules, night and morning, one week; wait four days, and if still indicated by the symptoms present, resume the administration of the same remedy night and morning, every fourth day.

#### DERANGEMENT OF THE STOMACH ARISING FROM CASUAL CAUSES—NOT HABITUAL.

This should be understood to apply to those who are only casually affected, but whose digestion is habitually unimpaired.

CAUSES.—The ordinary causes of this derangement are, hurried, imperfect mastication; overloading the stomach; fat, greasy, indigestible or tainted food, flatulent vegetables, ices, stimulants, and others equally well known.

#### HOMŒOPATHIC TREATMENT.

When the symptoms of approaching derangement of the stomach declare themselves immediately, or a few hours after a repast which has been too freely partaken of, a cupful of strong coffee, without milk or sugar, is frequently a sufficient restorative.

Should, however, this fail to relieve, and sick headache and inclination to vomit be present, we should assist nature by various artificial means—the milder, if sufficient, the better—such as tickling the throat with a feather, and by giving tepid water to drink until the stomach has completely evacuated its contents.

BRYONIA is very serviceable when the following symptoms are present: bitter eructations; *fever*, alternately with coldness and shivering, a redness of the face, heat in the head, and thirst with coldness and shivering; also when looseness of the bowels or constipation, and peevishness or excessive irritability are present. In derangement of the stomach, arising from succulent vegetables, and attended with excessive flatulence, this remedy is frequently productive of speedy relief.

*Dose:* Of a solution of six globules to two tablespoonsful of water, give a teaspoonful every two hours.

ARSENICUM. When there are acrid and bitter eructations with nausea and vomiting; also dry tongue, excessive thirst, salt taste in the mouth, and burning or violent pressure in the stomach, with diarrhœa or colic, and griping in the lower part of the belly, particularly when arising from the effects of an *ice* which had been partaken of, the patient being warm, or from fruit, stale vegetables, or *acids*

*Dose:* Three globules in a teaspoonful of water, every three hours—until amelioration or change

CARBO-VEGETABILIS is a very valuable remedy in this affection, either for the initiatory treatment, or after the previous administration of one or more of the other remedies, according to indications, for the purpose of removing any symptoms that may remain; it is, moreover, particularly useful where great susceptibility to the influence of the atmosphere, particularly to cold, exists at the same time; or in suffering arising from abuse of *wine*, *ices*, or salt; further, in derangement of the stomach, arising from having partaken of game or fish which has been too long kept, or meat that has been *recooked* whilst in a state of fermentation, which is liable to occur in warm weather; in the latter instances, *Carbo-v.* is to be preferred to any other medicine, and will rarely fail to afford relief.

*Dose:* Of a solution of twelve globules to three table-spoonsful of water, give a teaspoonful every four hours, until amelioration or change.\*

NUX-VOMICA is indicated by offensive or acrid eructations, constipation, and confused headache, particularly when arising from previous intoxication, or even slight over-indulgence in *wine* or *other* stimulants; when possible, it should be taken the same night, as when taken in the morning, although eventually relieving, it frequently causes an aggravation for a few hours. In derangement of the stomach, with heartburn, flatulence, more or less nausea and headache, etc., in consequence of a chill or of indulging in mental or corporeal exertion immediately after a meal, this remedy commonly affords speedy amelioration.

*Dose:* Four globules in a teaspoonful of water.

ARNICA is indicated in cases of derangement of the stomach, characterized by eructations resembling rotten eggs.

*Dose:* Of a solution of eight globules to two table-spoonsful of water, give a teaspoonful every three hours, until amelioration or change.

PULSATILLA, in recent cases of deranged digestion, with rising of food, tongue foul, and covered with phlegm; chilliness and lowness of spirits; and also when a *rash* has been thrown out in consequence of the derangement. This remedy is almost specific when the disturbance has arisen from the effects of rich food, such as *pork* or *pastery*, or even tainted meat, or from the effects of *ices*, *cold fruits*, or *crude vegetables*, *acid* or *impure wine*, etc.

*Dose:* Four globules in a teaspoonful of water.

#### OBSTINATE CHRONIC CASES OF FUNCTIONAL DERANGEMENT.

In cases of derangement of the *functions* of digestion, which, though modified, are extremely difficult of removal, the remedies hereinbefore noticed will be required for initiatory treatment; but in the majority of instances the patient will have to be subjected to an appropriate course of such remedies as those hereto subjoined, in order to complete the cure.

SULPHUR is one of the most important remedies for administration after the previous exhibition of *Nux-vomica* or *Pulsatilla*, and in cases which would otherwise correspond with the indications for either of those

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\* A small quantity of finely powdered charcoal, in a little good French brandy, or water will be found an equally efficacious mode of administering this remedy, as a corrective against derangement of the stomach, arising from having partaken of tainted meat or fish.

medicines, but when either of them has been inadequate to effect a perfect cure.

*Dose:* Six globules in a wineglassful of water every morning the first thing (fasting), for ten days (unless there be earlier improvement or change); then pause four days, resuming the course similarly, if necessary, and so on from time to time, until positive amelioration or change.

HEPAR-SULPHURIS is also of great value in cases in which the digestion is naturally weak, and sour vomiting, with burning sensation in the throat, colic and looseness of the bowels, are liable to be provoked by the slightest error in diet, and particularly when anything of an acid nature has been partaken of; or especially in cases in which the patient has previously taken blue pill, or any other mercurial preparation for a considerable time.

*Dose:* If *singly*, three globules in a teaspoonful of water night and morning for a week (unless earlier and decided improvement or change ensue); pause four days, and resume the course, if necessary, and so on, from time to time, until amelioration or change ensues.

SEPIA is also indicated by a sensation of *coldness*, and is to be preferred to either of the preceding remedies when this symptom is associated with a *multiplicity* of other equally characteristic indications, particularly if there be *no appetite*, or voracious appetite, and aversion to meat or milk, water-brash, especially after *drinking*; constant acidity of the stomach, aggravated by eating, and if fat things, milk, etc., continually disagree.

*Dose:* Four globules night and morning.

SILICEA is especially indicated when the patient entertains a repugnance to *cooked* food, and is particularly averse to *meat*; when the patient is subject to severe pains in the stomach, attended with excessive thirst and water-brash, bitter taste in the mouth in the morning, vomiting after drinking, and habitual nausea predominating *after a meal*, or upon rising *in the morning*.

*Dose:* Six globules in a wineglassful of water, every morning the first thing (fasting), until amelioration or change.

CARBO-VEG.—Here, again, this remedy is peculiarly valuable when annoyance or inconvenience is felt after every meal, amounting to nausea and vomiting, attended with excessive *flatulency*, and when the *pit* of the stomach is tender *on pressure*.

*Dose:* Three globules in a teaspoonful of water, until amelioration or change.

#### OBSTINATE CHRONIC CASES OF ORGANIC DERANGEMENT.

In cases in which organic disease has been established, that is, in such cases as assume the critical aspect described in the general description of symptoms at the commencement of this article, it were desirable, if possible, that the interference of an experienced Homœopathic practitioner should be invoked.

#### GENERAL DERANGEMENT OF THE STOMACH IN CHILDREN.

The foregoing particulars applying to general cases are equally to be kept in view in considering this affection more particularly amongst



children; but as the causes and features of such derangements are necessarily far less complicated amongst children than amongst adults, it may save the administrator much trouble to extract and render in a summary form, such details respecting the treatment of this affection amongst children, as will otherwise be gathered only in scattered portions of this article.

**IPECACUANHA, or PULSATILLA, or CARBO-VEG.** These medicines are of chief importance, either for independent, alternate, or successive administration in cases in which hurried feeding (*bolting* the food) imperfect mastication and overloading of the stomach, or rich, indigestible food, can be distinctly traced as the exciting causes of derangement. The particular indications for each may be gathered from those details which have already been afforded.

*Dose:* If singly or successively of either remedy, two globules in a teaspoonful of water, every three hours, until amelioration or change. If in alternation, dissolve eight globules of each remedy, separately, in a wineglass of water, and give a teaspoonful, first of one solution, then of the other, so that an interval of four hours shall elapse between the doses; and so on, until amelioration or change.

**PULSATILLA, or ARSENICUM, or CARBO-VEG.** These are in like manner appropriate in cases in which ices or cold fruits have been the exciting causes of derangement. In this instance, also, the particular indications for each may be gathered from the foregoing part of this article.

*Dose:* In every respect as directed in the foregoing prescription.

**PULSATILLA, or CHINA, or CARBO-VEG.** These medicines selected according to the indications afforded in respect of each in the former part of this article, are particularly appropriate to the treatment of derangements of digestion occurring amongst children, in consequence of having eaten tainted meat or fish.

*Dose:* In every respect as directed in the foregoing prescription.

**CARBO-VEG., or ARSENICUM.** These medicines, respectively, according to the indications hereinbefore afforded respecting each, are most appropriate, in the generality of cases, to the treatment of derangements of digestion occurring amongst children as the result of excessive use of salted articles of diet, especially salt meat.

*Dose:* Of either medicine, give two globules in a teaspoonful of water, every four hours, until amelioration or change.

**ACONITUM, or ARSENICUM, or CARBO-VEG.** These again occur as the most important remedies whence a selection should be made according to the special indications for each, which have already transpired in previous portions of this article, when acids (such as vinegar, etc.) are identified as the exciting causes of derangement.

*Dose:* Of the remedy selected as directed in the last prescription.

#### NAUSEA.

With respect to this affection, which must be considered purely as a symptom, the reader is referred to the foregoing portions of this article, wherein directions have been given for the treatment. In the majority

of simple and casual cases, however, it might suffice to consider the indications afforded for Ipecacuanha, Cocculus, Nux-vomica, Bryonia, Chamomilla, Pulsatilla, and Aconitum, following the same regulations respecting the dose.

In inveterate cases, however, in which this symptom occurs continuously, the accurate investigation of all symptoms associated with it, and of the whole of the foregoing details, becomes necessary, and one or more of the following remedies, according to the directions hereinbefore offered, may become necessary. Natrum-m., Arsenicum, Lycopodium, Lachesis, Carbo-veg., Rhus-tox., or Silicea.

### ERUCTATIONS.

With reference to eructations, as well as to nausea, as they must be considered purely as symptoms, the reader is referred to the foregoing portions of this article, wherein more distinct indications have been afforded, to facilitate the selection of the appropriate remedy. In most cases of a simple and uncomplicated character, the consideration of such indications as are afforded for the administration of the following remedies (chiefly) both as to *selection* and *dose*, will be sufficient to meet the requirements of the case: Arnica, Nux-vomica, Pulsatilla, Sulphur, Bryonia, Carbo-veg., Chamomilla, Cocculus, China, Antimonium-crudum, and Antimonium-tartaricum. In cases of an inveterate nature, and which are evidently associated with complications involving the whole of the digestive and nutritive system in more or less continual derangement, it may be advantageous to consider the indications afforded for Sepia, Acidum-sulph., etc.

### BILIOUS, OR SICK HEADACHE.

In ordinary cases, in which sick headache is evidently the result of a casual cause, it will suffice to consider the indications afforded for Antimonium-crudum, Ipecacuanha, Nux-vomica, Pulsatilla and Sulphur; or Bryonia, if this symptom be associated with costiveness.

### SYMPATHETIC AFFECTION OF THE BRAIN AND NERVOUS SYSTEM.

*Depression of Spirits—Hysterical and Hypochondriacal Affections.*—These most distressing results of long-continued or very severe derangement of the digestive functions, are almost invariably associated with what is termed "chronic indigestion," and not unfrequently afford an important clue to the treatment of the primary seat of disease. But nothing can be a greater source of error in most cases, than to deal with them as primary diseases of the brain and nervous system. Depression of spirits may occur as the consequence of derangement, either of the nerves or lining membranes of the stomach, but with very different characteristic features; for when the nerves are the seat of the disease, restless and uneasy anxiety, sudden fits of violent excitement, extreme irritability, impatience and *despondency with violent impulses*, are the result; when, however, the lining membrane is the seat of disease, extreme de-

pression of spirits occurs associated with languor, utter prostration, indolence, and listlessness.

SULPHUR is appropriate to the treatment of both varieties, but is more especially indicated by the *indolence* of mind and body, or by the vacancy of thought, or *absence of mind* and irresolution, which characterize the latter; it is however, also appropriate when the depression of spirits is associated with painful anxiety of mind, extreme solicitude concerning the future and respecting one's health and affairs, *erroneous* or *exaggerated* notions on *given subjects*, general wretchedness without any ascertainable reason, sudden fits of violent excitement and periodical return of extreme impatience, restlessness, irritability and impatience, when the following symptoms are also present:—sensation of fullness and weight at the pit of the stomach; habitual constipation, headache, and particularly pain at the top of the head; dullness and heaviness of the head, the patient being unable to exert his mental faculties, or becoming exceedingly weary and exhausted after any application of this kind; disposition to piles; or when chronic eruptions and affections of the skin are associated with the complaint.

*Dose:* Repeated doses are generally required, administered thus:—For adults six globules, or for young persons four globules in a wineglassful of water, every morning the first thing (fasting), for ten days (unless new symptoms or a change in the nature of the symptoms be sooner developed) then pausing for a week, and resuming the like course, if necessary; and so on until distinct amelioration or change; if in alternation with *Calcarea*, commence with three doses of *Sulphur*, as just described; pause four days and then administer three doses of *Calcarea* likewise, and so on until amelioration or change.

CALCAREA is indicated by depression of spirits with disposition to tears; *flushing of blood* to particular parts associated with attacks of indisable anguish, and generally palpitation of the heart, or painful sensations in the region of the heart; general uneasiness with aversion to mental or physical exertion; despondency respecting one's health, and apprehension of death; dread of mental aberration—or of contagion, or other causes of disease, or of imaginary misfortune; and when there is intense acuteness of all the senses.

*Dose:* In every respect as directed for *Sulphur*, whether singly or in alternation.

NATRUM-M, is indicated by depression of spirits accompanied with apprehensive *foreboding*, and with fretful, tearful disposition with desponding *expression*; love of solitude, which however nourishes the disease, and dread of society, whereby however it is alleviated; occasional bursts of violence; disgust of life; habitual moroseness and incapacity of mental labor; *weakness* of digestion characterized by aggravation of the sufferings, mental as well as bodily, and by general and indisable uneasiness after a meal and until the proper maceration of the food is completed in the stomach and has been conveyed to the bowels, or by susceptibility to the recurrence of such symptoms provoked by the least excess or irregularity; headache and want of appetite; nausea occurring every morning, etc.

*Dose:* Six globules, or for young persons four globules, in a wineglassful of water every morning, the first thing, fasting until amelioration or change.

AURUM-MET, is indicated by incapability to *concentrate the reflective faculties* and want of power of combination in the mind, characterized by *crushing* headache after the least exertion of the mind or attention, and a sensation as if the brain were dashed to pieces; painful anxiety of mind and excruciating restlessness; *whining*, fretful disposition and dread of death. This remedy is often of great service against the hysterical attacks of females.

*Dose:* As directed for *Natrum-m*.

LACHESIS is particularly indicated when the patient is haunted by the idea that he is the object of dislike, suspicion, or even hatred amongst his friends.

*Dose:* Three globules in a teaspoonful of water, morning and evening, until amelioration or change.

NUX-VOMICA is indicated by almost every variety of nervous, hysterical or hypochondriacal derangement, either characterized by indolence, or excitability, but especially the latter; deep dispondency with disgust of life, moroseness, and aversion to labor or exertion of any kind, characterized by the following symptoms: excessive sensitiveness, and aversion to the open air; *fainting fits*, after the least exertion, especially after motion in the open air, or giddiness, sensation of being stunned, and sparks of black spots before the eyes under the like circumstances; sensation of heaviness in the body, with weariness, languor, and great desire to assume or retain a recumbent position, by which the symptoms are alleviated; *emaciation*, and wiry condition of the flesh; intense sensation of lassitude and *fatigue*, even in the morning after rest, and often excitability which renders the patient reluctant to retire to rest at night: drowsiness in the morning, after meals, or in the evening, followed by sleeplessness at night; *sallow*, pallor or *yellowness* of the skin; heaviness, with pressive, tensive and *expansive* pain in the head; intense headache seated in the fore part of the head *along the brows*; or pain—often acute and piercing, as if some sharpe instrument were lodged there,—deep in the brain; swelling and redness of the eyelids, and red suffusion of the eyes, particularly in the morning; cramp-like, contractive gnawing or pressive pains in the region of the stomach and below the ribs, and at the pit of the stomach; extreme *sensitiveness* of the pit of the stomach to pressure; constipation characterized by slow and sluggish action of the bowels, with *dark*, hard, dry, and *large* but unfrequent evacuations,—or by intermingled, loose, and lumpy evacuations;—particularly appropriate, if there be disposition to piles; frequent discharge of pale, watery urine,—dragging and rheumatic aching pains in the back towards night; contused pains in the loins and back; numbness of the arms at night.

*Dose:* Three globules in a teaspoonful of water, *night* and morning, until a degree of good effect results, and then four globules in a teaspoonful of water *every night*, until positive amelioration or change. After which a course of *Sulphur* as above directed will usually be beneficial.

PHOSPHORUS is particularly appropriate for the treatment of delicate and highly hysterical females, and *fair* subjects of a spare and slender frame, and is indicated by sadness, alternated with apparently good spirits (with mirth); attacks of indescribable anguish, affright—



and even distressing hallucination, when *left by one's self*, or during stormy weather; timid disposition, startled at every sound and apprehensive of thieves and acts of violence, etc., painful anxiety, or uneasiness respecting one's health.

*Dose:* Four globules in a teaspoonful of water every night, until amelioration or change. Suspending treatment for four days after a week's course.

CHINA is indicated by distress, languor, or dullness of mind, the patient being easily *disheartened* and laboring under the impression that insuperable combinations are devised against him by adversaries to frustrate every undertaking; the patient *gives way* to despondency, and is overcome by a prevailing idea, *that he is doomed to be unfortunate*—symptoms which are characterized by the following: weakness of digestion, with recurrence or aggravation of symptoms generally, and with indolent disposition, ill-humor and distention of the belly after eating; chronic relaxation of the bowels; loose, yellowish, or slimy evacuations, or characterized by discharge of *undigested* food; or pale evacuations with dark urine; *small*, detached evacuations with slow and sluggish discharge and with deficiency of muscular vigor in the intestines; sometimes the organs of sense are acutely sensitive; sleeplessness occasioned by the crowding of ideas upon the mind, and by *visionary projects*, or sleep much disturbed by *anxious, painful dreams*, which continue to haunt the patient *when awake*, and attended with frequent change of position and tossing.

*Dose:* Three globules in a teaspoonful of water, night and morning, until amelioration or change.

SEPIA is of pre-eminent service in many confirmed and inveterate cases, particularly in females, and when complicated with severe hysterical affections; the patient being wholly abandoned to despondency and weary of existence, anxious respecting her own health, but averse to the consideration of household or other affairs, and often indifferent to every one but herself.

*Dose:* As directed for *China*.

SILICEA is of great service generally, in obstinate cases of hypochondriacal affection, resulting from stomach derangement, particularly if noise easily frightens or startles the patient, or if there be constant anxiety and agitation, weakness of the memory, incapability of reflection *moroseness and taciturnity*, intense irritability and tendency to be provoked to violence by contradiction, or excessive weariness of existence, further characterized by confusion of the head, or of ideas; *pain ascending from the nape of the neck to the top of the head*; headache recurring every morning; *heat* in the head, particularly in the forehead; lacerating or darting pains in the head, or pulsating headache, with flushing of blood to the brain; temporary defect or *suspension* of vision; confusion and mistiness of sight when reading; redness of the eyes and adhesion of the eyelids at night; the strong light of day is painful to the eye; *bleeding at the nose*; *continued and watery* discharge from the nose; constant sneezing; hardness of hearing; scabby eruption on the lips, or swelling of the glands of the lower jaw; toothache at night, aggravated or provoked by *hot or cold* things; soreness of the tongue, or dryness of

the mouth; deficiency of taste or bitter taste; acid risings and water-brash, or pains in the stomach or bowels, or even vomiting after eating; *nausea every morning*; *colicky* pains associated with *constipation*; piercing or nipping pains in the bowels; puffing of the belly and *difficult* expulsion of very fetid flatulency; hard stools with constant urging, or constipation characterized by *hard, knotty*, detached motions, evacuated slowly and with difficulty; *wetting the bed*; looseness; suffocating cough at night; *aching* pain in the *chest* and *impeded* breath; numbness of the arms induced by lying upon them; trembling of the knee; offensive smell from the feet; cold feet, sweating of the feet, or lastly, cramps of the legs, particularly *during rest* and *after exertion*.

*Dose:* As directed for *China*.

#### ACCESSORY TREATMENT AND DIET.

In no class of disorders is it more requisite to adhere strictly to dietetic regulations, than in those which consist of derangement in the digestive system, whether so-called functional or organic; the patient should, therefore, in such cases, regulate his regimen, as closely as possible, by the rules laid down at the commencement of this treatise (pp. 79, 80), carefully avoiding, moreover, all such articles as he may find disagree with him, even if they be allowable as a general rule.

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### HÆMATEMESIS, HEMORRHAGE FROM THE STOMACH.

#### VOMITING OF BLOOD.

This is scarcely ever an original affection, but almost always symptomatic of some other disease.

Vomiting of blood may depend on a variety of causes, and if it inclines to become profuse and threatening, it is of the utmost importance in practice to investigate with accuracy and care the precise causes in each attack. As a complicating symptom bleeding occurs, more particularly, in diseases characterized by a peculiar alteration of the whole mass of blood, such as typhus, scurvy, yellow fever, etc. The hemorrhage may be very copious, although none of the larger vessels are ruptured. A second cause of the bleeding is a rupture of the walls of vessels. It may be caused by excessive accumulation of blood in the stomach depending upon disturbances, engorgements, etc., of the vena porta, liver, spleen—hence it is not of unfrequent occurrence in the case of individuals afflicted with piles; or the hemorrhage may be caused by menstrual suppressions and stoppages, on which account it occurs more frequently at the climacteric age; it sometimes seems as if the hemorrhage took place as a substitute for the menstrual discharge. The vomiting during pregnancy is very frequently stained with blood. The worst kind of bleeding arises from injuries of the stomach walls, consequent upon ulcerations of the mucous membrane. It is met with in chronic dyspepsia and cancer of the stomach. If there is a disposition to bleeding, it may be provoked by a blow upon the stomach, a fall, or violent emotion.

The symptoms of hæmatemesis differ, according as the bleeding is more or less copious, and arises from different causes. If the bleeding is but slight, and the blood is not vomited up, the accident remains sometimes entirely unnoticed. If the vomited substance only contains a few

streaks of blood, it has no particular significance at the time, but the patient has to be watched with more care, because we can never be sure whether a more dangerous hemorrhage is not threatening. The blood should likewise be examined, with a view to discovering disease changes that had remained latent heretofore. The bleeding likewise acquires importance from the circumstance, whether the blood is discharged with violent straining, or is vomited up easily; in the latter case, the bleeding is much more significant, on account of its indicating ulceration of the mucous membrane, or some important change, dilatation, etc., of the vessels, whereas a little blood may be discharged in consequence of violent straining, even if the vessels are perfectly intact.

As soon as a somewhat considerable quantity of blood is vomited a series of characteristic symptoms appear. The morbid symptoms that already happen to be present, become associated with a constantly increasing dull pressure in the pit of the stomach, and a distressing feeling of distention of the stomach, generally attended with nausea. If the bleeding takes place slowly, the preliminary symptoms may be confined to these few; on the contrary, if the blood is expelled with rapidity and force, the patient experiences the usual symptoms of a considerable loss of blood, such as anxiety, paleness, cold sweat, cold skin, vertigo, and even fainting. A large quantity of blood is vomited up at once, and with great force. The action of the gastric juice imparts to it a blackish hue, and has the consistence of coagulated sour milk. The quantity discharged at one vomiting often exceeds one quart, so that it seems scarcely possible that the stomach could have contained such a large quantity at once. Immediately after the vomiting the patients feel faint and exhausted, and are tormented by an almost unquenchable thirst; at the same time a visible throbbing occurs in the pit of the stomach, of which the patient himself is conscious. After this paroxysm, a period of rest and comparative ease sets in, until another attack of bleeding occurs. The interval to the next bleeding, lasts from a few hours to several days; in violent cases four or five attacks may occur on the same day; of course, in such a case, severe symptoms of anæmia may set in even unto convulsions, and death may be the immediate consequence. If so much blood is expelled from the stomach, the stools are likewise black as coal, and very thin; it may even happen that the blood is not vomited up first, but that the black stools may be the first sign of the bleeding. Regarding a return of the bleeding, we cannot speak with certainty; it depends entirely upon the primary exciting cause. If there is a frequent return of the bleeding anæmia and dropsy are unavoidable results. Recovery from a single attack usually takes place slowly, the patients being at the same time tormented by a variety of gastric disorders, such as a burning distress in the region of the stomach, foul taste, sweetish or foul eructations, horrid thirst, and by a long-continued abdominal pulsation. Under all circumstances there is great danger lest the bleeding should return, hence the patient cannot be too careful in not overtaxing the stomach. Bleeding resulting from ulceration may not afford much relief, but in cases of hæmatemesis, of which we are unable to discover the exact cause, or which depend upon the suppression

of other hemorrhages, the relief afforded by such bleedings may be quite considerable.

As regards diagnosis, two circumstances may deceive us. In the first place a violent paroxysm of hæmoptysis may be mistaken for vomiting of blood, and the deception may be kept up, if a physician does not himself examine the vomit, since patients often are so overwhelmed with anxiety that they lose all calmness and presence of mind. In other respects the black color of the vomit, and the absence of the bloody expectoration, which always follows a paroxysm of bloody cough, furnish the surest indications regarding the true character of the attack. It likewise happens that a person may have a violent attack of nosebleed over night, and that the blood may be swallowed; if the quantity of the swallowed blood becomes excessive, it awakens the person, and the blood is then vomited up, and may look precisely as it does when true hæmatemesis takes place. It is difficult to distinguish one from the other; our diagnosis has to be more particularly determined by the absence of all precursory symptoms and subsequent gastric derangements. The use of whortleberries and similarly colored fruit may likewise occasion a momentary deception, more particularly if the patients are very anxious.

As a general rule, the prognosis in all ordinary cases, is favorable, except where the hemorrhage is at once so excessive that death results from the mere loss of blood. The prognosis, however, is always doubtful in so far as a first bleeding leaves an inclination to a renewed attack, and the bleeding always indicates the presence of dangerous alterations in the stomach. Hence a permanent cure is never absolutely certain.

#### ALLOPATHIC TREATMENT.

HÆMATEMESIS (vomiting of blood) is a symptom of some other affection, the most serious of which are an Ulcer and Cancer of the Stomach. It may be well to enumerate the symptoms of hemorrhage of the stomach, and hemorrhage of the lungs, inasmuch as by so doing needless fears may be allayed by understanding fully the contrast between the symptoms accompanying each. The distinction may be more clear, if given in this table.

In Bleeding from the stomach.  
Sickness of the stomach.  
Fullness in vicinity of stomach.  
Blood vomited freely.  
Blood not frothy.  
*Blood dark colored.*  
Blood mixed with food.  
Symptoms refer to stomach.

In bleeding from the lungs.  
Difficulty in breathing.  
Pain or heat in the chest.  
*Blood coughed up by mouthfuls.*  
Blood frothy.  
*Blood of a bright red color.*  
Blood mixed with spittle.  
Symptoms refer to lungs and bronchial tubes.

The first efforts in treatment will be to arrest hemorrhage. The patient should be confined to the bed; cold may be applied over the stomach; small pieces of ice should be swallowed. If the bleeding is excessive there should be entire rest of the stomach and nourishment should be given by injection. Among the most suitable for this purpose is strong beef tea and milk.

From four to six ounces may be used at each injection, four times a day. The addition of half a teaspoonful of pepsin will aid its digestion. If the return should be especially sensitive and does not retain the injec-



tion, twenty or thirty drops of laudanum should be added, and after the injection firm pressure should be made upon the anus with a napkin under the hand, until all efforts to expel it cease. It sometimes happens that vomiting of blood takes the place of the menstrual flow. If this is the case it should not be immediately arrested, but kept within proper limits. The swallowing of ice, cold over the stomach, and hot foot baths, are permissible. Pain will require an anodyne—20 drops of laudanum, or a third of a grain of morphine every hour or two, until relief is obtained.

Remedies addressed directly to the flow of blood may be called for. Those most likely to be in the house, ready for an emergency, are: Acetate (sugar) of Lead, Turpentine and Alum. Acetate of Lead may be given in powder in doses of a sixth or eighth of a teaspoonful, and repeated in an hour, if necessary. The dose of Turpentine is ten to twenty or thirty drops, given on sugar or in mucilage or syrup. Alum may be given in powder, in doses of a quarter of a teaspoonful. Cathartics or emetics must not be given.

Monsel's solution of Subsulphate of Iron is the best remedy known to staunch hemorrhages. In these cases ten drops of the solution should be given in ice water, and after the first two or three drops, can be given frequently, from ten to thirty minutes apart, if the bleeding does not cease.

Tannin is a useful remedy; the dose in this disease is from ten to twenty grains. It should be given in powder.

Excluding the existence of ulcer, cancer or other lesion of the stomach, treatment will have reference to the debilitated condition of the system, and the prevention of a recurrence of the hemorrhage. To this end, easily digested food, which is nutritious, as beef essence, milk, raw eggs, and broths. Ten-drop doses of Aromatic Sulphuric Acid may be given before meals, in an ounce or two of some of the simple bitter infusions (teas), as Columbo Gentian, Quassa, Peruvian Bark, etc., made with an ounce of the drug to the pint of hot water.

The Tincture Muriate of Iron may be given in doses of from ten to twenty drops, in sweetened water, after meals. The Citrate of Iron and Quinine frequently answers the purpose better than anything else. It should be given in solution, in water or syrup of orange flowers, in doses of three to five grain.

### HOMŒOPATHIC TREATMENT.

**ACONITUM** should be given when the premonitory symptoms detailed declare themselves, and particularly when a considerable degree of fever precedes the attack.

*Dose:* Dissolve six globules in two tablespoonsful of water, and give a teaspoonful of the solution, repeating the dose in half an hour, and then every hour till positive amelioration or change. In this mode, if taken in time, we may often, by calming the circulation, prevent an attack.

**IPECACUANHA.**—For a first attack we know of no better remedy than this; unless some very peculiar symptoms should render some other medicine necessary, we would use this. Against following attacks it is

not so good. The less the vomiting of blood depends on some previously existing disease, the more this remedy is indicated.

*Dose:* This must be large; 5 or ten drops of the tincture and frequently repeated every 30 to 60 minutes, if the case is urgent.

**NUX-VOMICA.**—In a full habit of body, with a marked tendency to congestion of the stomach and bowels, particularly when arising from suppression of hæmorrhoids, or of the menstrual discharge, or from indulgence in vinous, spirituous, or fermented liquors; this remedy is still further indicated by irritability of temper, and liability to constipation.

*Dose:* Four globules in a teaspoonful of water, every four hours, until amelioration or change.

**PULSATILLA.**—The value of this remedy is noticed in the diseases of females above mentioned; it is also in many cases found more suitable than *Nux-vomica* for males, when of lymphatic temperament and mild disposition. Distinctive derangement of the digestive or menstrual functions constitutes the general indication for this medicine.

*Dose:* As directed for *Nux-vomica*.

**CHINA.**—When a quantity of blood has been already vomited, this remedy, from its power of restoring the energy of the system after debilitating losses, is clearly indicated; it should also be chosen when the patient has had a severe attack of vomiting of blood, which has ceased of itself, but still left great weakness.

*Dose:* Six globules in a teaspoonful of water, every two hours, until improvement or change; if, however, there be very palpable amelioration after the *first* dose, the repetition may be suspended until the symptoms recur, or for twenty-four hours.

**ARNICA.**—One of our most important remedies in severe cases, and especially when occurring in individuals of a robust constitution, of a sanguine temperament and choleric disposition. It is further indicated when the patient complains of pains, resembling the results of a contusion, in all the extremities.

*Dose:* Dissolve six globules in two tablespoonsful of water, and give a teaspoonful of the solution every hour, until distinct improvement or change.

**SULPHUR** is useful in scrofulous habits, or when the affection has arisen from suppressed hæmorrhoids; its value, also, in cases of unhealthy menstruation will be pointed out in the proper place.

*Dose.* Three globules in a teaspoonful of water, every four hours, for the *first* day, or until the violent symptoms subside. Then six globules in a wineglassful of water, every morning the first thing (fasting) for ten days; pause four days, and resume the course, and soon from time to time when no acute symptoms are present.

#### ACCESSORY MEASURES.

The application of dry cupping-glasses to the stomach and under the ribs,—or of a cloth, which has been dipped in moderately cold water, to the lower region of the belly,—sometimes forms a useful auxiliary in arresting the discharge of blood. See also the article on "*Discharge of blood from the Lungs.*"

**DIET AND REGIMEN.** The rules hereafter given under **SPASM OF THE STOMACH** should be enforced, with the utmost rigor; solid food cannot be permitted, and all drinks should be cold; animal jellies, preparations of milk, light puddings and broths, merely tepid, may be allowed in cases where the patient may require such nourishment, but nothing more must be taken than is absolutely necessary for that purpose; immediately after the attack, no food should be given for some hours, and then very cautiously, and in small quantity. It is evident that, in such cases, absolute rest, both mental and bodily, is essentially requisite.

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## CARDALGIA.

### SPASM OF THE STOMACH.

**SYMPTOMS.** Contractive and spasmodic or gnawing pains about the region of the stomach, extending to the chest and back, attended with anxiety, nausea, eructation or vomiting, with faintness and coldness of the extremities; the patient is sometimes relieved by emission of ascending wind, and, when complicated with heartburn, by a discharge of a quantity of limpid fluid; occasionally headache and constipation are present. In some cases the pain is very slight (but there is always more or less), and a degree of anxiety, with nausea, often increased by taking food.

**COMPLICATIONS.** The disease is frequently accompanied by a disease of the liver, spleen, or of the pancreas gland, or even by cancerous degeneration of the stomach or first portion of the small intestines, in its advanced stages. It is a frequent attendant on gout.

**AGE, SEX, ETC.** It is a more frequent affection in the female than the male sex, often occurring after the cessation of the usual monthly discharge, or from any interruption of its usual course; in such instances it is frequently accompanied with hysterics and fainting, and may pass on to vomiting of blood. It very rarely occurs before the age of puberty.

The paroxysms last for a longer or shorter time according to the violence of the affection, and return in many instances periodically; and may be brought on by partaking of improper articles of diet, or, in severe cases, by any solid food whatever.

**ORIGIN.** This disease originates in an unhealthy state of the *nerces* of the stomach.

**THE EXCITING CAUSES ARE:** Long fasting between meals, very hot or cold drinks, an habitual use of ardent spirits, or of indigestible food, worms, and, in some instances, exposure to cold or damp weather. But coffee is the article to which most persons owe this pain.

**PRECAUTIONS TO BE OBSERVED BY THOSE WHO ARE SUBJECT TO SPASM OF THE STOMACH.**

The chief articles to be avoided by an individual suffering from this malady, are: Crude, uncooked vegetable substances (such as salads), cheese, new bread, sweet meats, cherries, nuts, olives, and roasted chest-nuts, and stimulants of all kinds, whether tea, COFFEE, alcoholic or fermented drinks.

## ALLOPATHIC TREATMENT.

**SPASM OR CRAMP IN THE STOMACH.** If the trouble occurs suddenly upon the ingestion of some article of food, which is plainly irritating the stomach, the organ should be relieved by an emetic of twenty grains of powdered Ipecacuanha in a glass of warm water. If the trouble is not plainly referable to such a cause, neither emetics nor cathartics should be given, but the pain must be relieved. This is done most quickly by giving thirty drops of Laudanum, and repeating the dose at intervals of half an hour to an hour, until the pain is relieved; or a third of a grain of Morphine may be given at the same intervals. A laxative of a couple of Compound Cathartic Pills may be needed after the pain is relieved, to prevent constipation from the opiate.

In cases subject to frequent returns of the pain, it is not advisable to give opiates, on account both of the liability of producing the "opium habit" and of the disturbance its frequent administration produces in digestion.

Sometimes cold and sometimes hot applications, over the stomach, relieves the spasm and pain. Rubbing the skin over the stomach with a liniment made of an ounce each of Chloroform, Tincture of Aconite and Soap Liniment, or laying a flannel, wet with equal parts of Turpentine and Laudanum, and covering it with oiled silk. Tincture of Belladonna in doses of ten drops, or Tincture of Hyoscyamus in doses of one or two teaspoonsful, taken internally, is useful in relieving pain.

When pain occurs in the stomach, with spasms, the same proceedings are useful, but some remedies seem to have especial benefit. If there is indigestion and irritation of the mucous membrane, Bismuth, in doses of a scruple three or four times a day, may be given. In these cases the following is a good formula: Take of Sub-Nitrate of Bismuth two drams, Pepsin one dram, Dilute Hydrocyanic Acid half a dram, Mucilage of Gum Arabic and Peppermint Water of each two ounces. Mix, and take a tablespoonful three times a day.

The Purified Black Oxide of Manganese, in doses of ten to twenty grains, is also a beneficial remedy, and can be used in case of failure with the Bismuth.

Cases accompanied with the formation of gas, should be treated with Nux-vomica, in doses of ten drops of the tincture, or one-fourth of a grain of the extract in pill, three times a day; or Strychnine, in doses of one-thirtieth of a grain, may be given instead.

The Elixir of Bark, Iron and Strychnine, or Elixir of Quinine, Iron and Strychnine, in doses of one or two tablespoonsful three times a day, are appropriate to these cases.

In cases resisting other remedies, Fowler's Solution (Solution of the Arsenite of Potash), in doses of one or two drops, in water, after eating, is almost always beneficial.

Some change in the mode of life may be particularly important as from inactive pursuits indoors to an active life in the open air; as, also, in some instances change of scene and climate, may be of the greatest value.

In the use of stimulants, the advice of a conscientious physician



should be rigidly followed. Harm will result from their use if taken at other times than with the meals, and in small quantities. The symptoms of dyspepsia should be met as are directed in that article.

The tonics recommended to be of use should be taken for a long time. Each recurrence should be met as directed in the first part of this article.

**PYROSIS.** Sour eructations after meals may generally be prevented by taking fifteen drops of Dilute Hydrochloric or Lactic Acid, in sweetened water, before meals. Sulphurous Acid, in doses of twenty drops, in sweetened water, before meals, will sometimes have a better effect. Either of these Acids often has a better effect when given in a teaspoonful of Glycerole of Pepsin.

Alkalies, to be useful, should be taken when the sour eructation begins to appear in an amount sufficient to correct the symptom. Bicarbonate of Soda (Baking Soda) is best suited to this end. It is best given in milk or water. Alkalies are beneficial when the amount taken can be gradually diminished with relief of the symptoms.

Bismuth is a very useful agent in most of these cases. It is best given with a little Carbolic Acid, as in this formula: Take of Subnitrate of Bismuth three drams, Carbolic Acid four grains, Mucilage or Gum Arabic one ounce, Peppermint Water three ounces. Mix. Shake the vial and give a tablespoonful three or four times a day.

When Bismuth is given alone it is best given in milk.

### HOMEOPATHIC TREATMENT.

Notwithstanding the usually intractable nature of this affection, it has been treated with marked success by the method about to be pointed out.

**NUX-VOMICA** is one of the principal, and, in a large number of cases, the most appropriate of remedies against spasms of the stomach, and particularly in cases where this affection can be attributed to the long-continued use of strong coffee, or an excessive indulgence in spirituous liquors; it is of essential service in many cases of the same disorder, which have arisen after the suppression of chronic or hæmorrhoidal discharges, or when the party affected is liable to fits of hysterics or nervous dependency. The following are the immediate symptoms which call for the administration of this medicine:

*Constriction, pressure, squeezing, or spasm* in the stomach, accompanied with a sensation, as if the clothes were *too tight at the waist*, or as if wind were pent up in the sides, beneath the lower ribs. This sensation, as well as the pains before mentioned, become generally increased after a meal, or after partaking of coffee; in addition to which, a feeling of depression or constriction is experienced at the chest, which, in many cases extends to between the shoulders and the lower part of the back. Frequently, also, we find nausea, accumulation of clear water in the mouth, or risings of sour bitter fluids, attended with a sensation of burning in the throat and gullet (heartburn); the tongue tremulous, cracked or fissured, clean, of a vivid red, coated yellow, or covered with a white mucus; lips and gums white, red and swollen; blanched, yellowish, and somewhat indurated lips; eyelids inflamed at the margins; sour or putrid taste in

the mouth; vomiting of crude materials; flatulent distention of the bowels; *constipation*; aching in the forehead; palpitation of the heart, and anxiety. When these symptoms are liable to be excited by a fit of passion, or become aggravated in the morning, or when the patient is occasionally awakened out of his sleep by the spasmodic attack, this remedy is still more certainly indicated.

*Dose*: In severe cases, of recent origin, three globules in a teaspoonful of water, every three hours, until amelioration or change. In chronic cases, with more or less acute pain after every meal, of a solution of six globules to two table-spoonfuls of water, give a teaspoonful every evening until the whole is consumed, or in the like proportion, until positive amelioration or change. When the spasm of the stomach returns *periodically*, or when from some imprudence in diet we have reason to apprehend an attack, three globules should be taken in a teaspoonful of water, three hours before the expected recurrence of the symptoms, or, in the latter case, immediately after the possible cause has transpired. This rule applies in respect of *any* of the remedies herein prescribed, which have been administered with *success* against former attacks. If temporary relief, only, followed by more intense suffering, has ensued, and continues *three* hours after a *second* dose of *Nux-vomica*, proceed with the next medicine.

CARBO-VEGETABILIS should be given three hours after the second dose of *Nux-vomica*, if that remedy has produced only partial good effect, and will generally complete the cure, provided the affection be not too deeply seated, and consequently one of long standing.

*Dose*: Three globules in a teaspoonful of water, morning and evening, for four days.

CHAMMOMILLA. For the employment of this remedy, the principal indications are: Pressure, *as if from a stone in the pit of the stomach*, or painful pressure and flatulent distention at the same part, as, also, of the region beneath the lower ribs and the belly itself, with shortness of breath, anxiety and throbbing headache; *mitigation* of the above symptoms on partaking of *coffee*,—a distinguishing mark between the indications of this remedy and those of *Nux-vomica*;—on the other hand (as in the case of the latter), it is also indicated when the symptoms as described are liable to be brought on by a fit of passion.

*Dose*: Three globules in a teaspoonful of water, every four hours, until amelioration or change.

BELLADONNA ought to be substituted for Chamomilla, or should be administered *four* hours after the *third* dose of the latter, when it has not been followed by relief, notwithstanding the apparent similarity of these symptoms; farther indications for *Belladonna* consist of gnawing, pressure, or spasmodic tension in the pit of the stomach, *relieved on bending backward and holding in the breath*; or, further, spasm of the stomach, which recurs daily during dinner, or else pain of so violent a nature as to deprive the patient of consciousness; tremulous, vivid-red and shining tongue, or redness of the tongue and elevation of the papillæ; red and spongy lips.

*Dose*: Three globules in a teaspoonful of water, every four hours, until the indicative symptoms are removed. If followed by more suffering after the third dose of *Belladonna*, proceed with *Gelsemium*, as directed for *Belladonna*.

**COCCULUS**, in many cases of this complaint, is particularly indicated, when, in addition to the usual symptoms, there are constipation and constrictive pains over the entire stomach, with flatulency, and accumulation of water in the month, and alleviation of the sufferings on the recurrence of the latter symptoms.

*Dose:* Of a solution of six globules to two tablespoonsful of water, give a teaspoonful every three hours, until amelioration or change.

**PULSATILLA** is useful in cases with shooting pains in the stomach, *which are aggravated by movement, and particularly making a false step.* *Pulsatilla* is also one of the most appropriate remedies when the attacks are followed by vomiting, or accompanied by violent tension and squeezing, or throbbing and sensation of anxiety about the pit of the stomach, increase of pain after eating, or more particularly a feeling of pressure and pinching after dinner, with a relaxed state of the bowels, or a disposition thereto. Disposition to hysterics or nervous despondency. This remedy is very serviceable in cases of this affection, arising from suppressed menstruation.

*Dose:* Of a solution of twelve globules to four tablespoonsful of water, give a tablespoonful every six hours, until amelioration or change.

**SEPIA** is an efficacious medicine in spasm of the stomach, arising from suppressed or difficult menstruation, and may in general cases advantageously follow *Pulsatilla*; it is indicated when most of the sufferings arise after a meal, by pressure in the stomach as from a stone and by a *burning pain* in the pit of the stomach; and by restoring singly, or in conjunction with *Pulsatilla* and *Sulphur*, the menstrual flux, it frequently removes the spasm at the stomach and hysterics consequent upon this derangement, or, at least, places the affection in such a position that it is easily cured by some other medicine, closely corresponding to the remaining symptoms.

*Dose:* In recent (not chronic) cases, of a solution of four globules to two tablespoonsful of water, give a teaspoonful every four hours until amelioration or change. In chronic cases give three globules in a teaspoonful of water night and morning for a week, then pause four days and resume the course, suspend treatment, or change the remedy according to circumstances, the thirtieth potency is best.

**CHINA** is of great service in most cases of spasms of the stomach with general weakness, arising from loss of humors, the result of *blood-letting*, or repeated loss of blood, abuse of emetics or *aperients*, *too long-continued suckling*, etc.; and it is further indicated by great weakness of digestion, distention, and uncomfortable weight, pressure or pains in the stomach after eating, so that the patient feels much easier when fasting; these latter symptoms are the more immediate indications for the employment of this medicine.

*Dose:* Of a solution of four globules to two tablespoonsful of water, night and morning for three days; and afterwards three globules in a teaspoonful of water every third night, until positive improvement or change.

**BRYONIA**. This medicine is more particularly adapted to the milder cases of spasm in the stomach, with *painful pressure*, or a feeling of *disagreeable fullness* in the stomach after a meal, which occasionally becomes converted into a feeling of constriction, cutting or pinching, and is *relieved by eructation and external pressure*. This remedy is, moreover, still more

clearly indicated when the symptoms are generally accompanied by severe headache or painful compression in various parts of the head, and particularly at the temples, which is liable to be excited whenever any article of diet disagrees in the slightest degree; increase of the sufferings by movement; habitual costiveness.

*Dose:* Three globules in a teaspoonful of water every two hours, until amelioration or change.

**ARNICA-MONTANA**, in spasm or pains in the stomach, which have originated in the effects of a strain, or from a *blow*, etc., will be found specific. It is, however, also an excellent remedy when there is a sense of fullness and *constrictive* pain in the stomach and in the fore part of the chest, shooting pain in the pit of the stomach, with painful *pressure* as from a stone, or aching, extending to the back, and tightness of the chest, increased by eating, drinking, and external pressure.

*Dose:* Of a solution of four globules to two tablespoonfuls of water, or in the like proportion, give a teaspoonful night and morning, until amelioration or change.

**ARSENICUM** is required for periodic pains in the stomach, chiefly consisting of a burning character, and attended with acrid, sour eructations, vomiting of crude materials, or of mucus, sometimes even of blood; tremulous, swollen, or glazed, red and fissured tongue; blanched, waxy, and somewhat indurated lips; want of appetite; extreme debility, emaciation.

*Dose:* Two globules in a teaspoonful of water, every three hours, until amelioration or change; or in very acute cases characterized by excessive prostration and livid aspect, give one globule in a teaspoonful of water immediately, repeating the dose after half an hour, and again every two hours, until positive amelioration or change. But if little or no *permanent* relief ensue within two hours after the sixth dose, consider the various other remedies herein named. In *chronic* cases, give three globules in a teaspoonful of water, night and morning, until distinct amelioration or change.

**CALCAREA**.—In obstinate cases, occurring in individuals who are habitually addicted to the abuse of wine or ardent spirits, *Calcarea* will generally be found of great service, especially after the previous employment of *Nux-v*. It is further a valuable remedy in the cases of females of full habit of body, subject to discharge of blood from the nose, or to excessively copious menstruation; and is *generally* indicated when the paroxysms of pain come on usually at night, or *after a meal*, in which latter instance, vomiting sometimes results, or nausea and acidity, with painful sensibility on pressure at the region of the stomach. Constipation, hæmorrhoids, or chronic looseness of the bowels are additional general indications for the employment of this remedy.

*Dose:* Six globules in a wineglassful of water, every morning the first thing, for a week (unless earlier relief or change ensue); pause four days, and then, if necessary, resume the course as before, and so on, until positive amelioration or change.

**DIET AND REGIMEN**.—These are subject to the same general rules as have already been afforded in the article on Indigestion.



## HEARTBURN. BLACK-WATER. WATER-BRASH.

This is not an affection of the organ whose name it bears, but a painful or uneasy sensation of *heat* or *acrimony* about the pit of the stomach, sometimes extending upwards. It is frequently accompanied with anxiety, nausea, and vomiting; or a violent gnawing, spasmodic pain in the region of the stomach, from which the patient experiences no relief, until he succeeds in ejecting a quantity of limpid fluid.

TREATMENT.—As Heartburn is, strictly speaking, a mere symptom emanating from derangement of the stomach, the general articles on “Indigestion” and its subordinate affections should be considered.

## CHAPTER XIII.

## DISEASES OF THE INTESTINES.

## DIARRHŒA.

Diarrhœa, or Looseness of the Bowels, is a disease of frequent occurrence, manifesting itself more especially during the warm months of the year, though it may take place at any season. All persons are alike subject to it when exposed to the causes.

SYMPTOMS. Diarrhœa consists in frequent evacuations from the bowels, of a more fluid nature than usual, each discharge being usually accompanied with, or preceded by, a rumbling in the bowels, together with a sense of weight or pressing down, and commonly relieved as soon as the evacuation takes place, but are renewed before the one, which is to succeed, ensues. More or less griping is present, and not unfrequently nausea and vomiting. Fever is not usually present in diarrhœa. When the discharges are very frequent, or in large quantities, they rapidly reduce the strength of the system; emaciation takes place; the functions of the system become impaired; the skin becomes pale, dry, rigid and eventually sallor; and if the disease continues, the feet and legs become dropsical. The discharges become more and more offensive, a slow fever ensues from the exhaustion, and the patient dies.

According to the character of the evacuations and the exciting causes, diarrhœa has been divided into several varieties, thus:

1. *Lienteric Diarrhœa*, in which the food is rapidly passed into the bowels, and appears in an undigested condition in the evacuations; and is

due to an impairment or suspension of the functions of the stomach, with great irritation in the intestinal canal.

2. *Chylous or Cœliac Diarrhœa*, in which the discharges are of a milky white, or dirty white color, and is due either to a congested condition of the mucous membrane of the small intestines, or to tubercular (consumptive) disease of the mesenteric glands (small glands in the membrane uniting the bowels).

3. *Mucus Diarrhœa*, in which considerable mucus is found in the discharges, being occasionally streaked with blood; due to colds and exposures.

4. *Bilious Diarrhœa*, in which the evacuations are mixed with much yellowish or greenish looking bile, and most generally accompanied by nausea and vomiting, due to cold, anger, chagrin, etc.

CAUSES.—Diarrhœa may be caused by improper exposure to excessive heat or cold; by the use of acid, unripe fruit, indigestible or other irritating food, from the presence of worms; from overloading the stomach with food; sudden frights; fits of anger, grief, and other depressing emotions; certain articles of diet occasion diarrhœa in some persons which are quite agreeable and salutary to others. A very frequent cause of diarrhœa, among infants, is the use of spoon meats and other gross articles of diet; it may also arise from the bad quality of the mother's or nurse's milk, from the irritation caused by teething, etc., the going-in of cutaneous eruptions; fermented liquors, etc., are also among the exciting causes; changes in the atmosphere, rendering the disease epidemic in certain localities; the unwise use of cathartics, is not an unfrequent cause.

#### ALLOPATHIC TREATMENT.

This disease is frequently transient, due to temporary indigestion, or following some dietetic error. In these instances little or no treatment is necessary, except guarding indulgence of the appetite more carefully. If the contents of the large intestine (bowel) is not spontaneously expelled, a cathartic should be given. For this purpose, a tablespoonful of Epsom Salts, with ten drops of deodorized, or common Laudanum (Tincture of Opium), to allay irritation, or a Siedlitz powder answers a good purpose. A tablespoonful of Castor Oil, or five or ten grains of powdered Rhubarb will also meet the indications. If the evacuations have been copious, and of a feculent character, a cathartic is not required. After the bowels have been thoroughly emptied, if diarrhœa and pain, or uneasiness, still continue, it should be relieved by an anodyne, one or two teaspoonsful of Paregoric, or five or ten drops of Laudanum, in a tablespoonful of Chalk Mixture, or Cinnamon water, with the addition of a little Prepared Chalk or Soda, or five grains of Dover's powder. Whatever the remedy chosen, it should be repeated every six or eight hours, if needed. The diet, for a few days, should be simple and restricted. A diet composed largely of milk is suitable. Care should be used that the bowels do not become over confined. If they do not move, spontaneously, they should be started again by one or two Compound or Improved Cathartic pills, twice a day, until an action is produced. It should also be stated that a free injection of warm water, followed by a

small injection of warm water, or thin Starch, with half or two-thirds of a teaspoonful of Laudanum, will frequently cure a diarrhœa.

Should the diarrhœa tend to continue, or frequently return, the principal treatment will refer to diet and measures to render digestion complete. Tender meats, cooked rare; eggs, chicken, and milk, are most generally found to meet the end required; but in some cases starchy articles, such as Rice, Corn Starch, Tapioca, Sago, Arrowroot, Wheat or Oat-meal, with milk, are found best suited.

If the patient has been deprived of fresh vegetables and ripe fruits, they should be supplied in moderate quantities. A moderate quantity of food, frequently taken, is generally better than a full meal once or twice a day.

In some instances a change of climate is demanded. A removal from the city to the country is frequently curative in the hot weather, partly from the tonic effect of the country air, and partly from the use of fresh milk, and ripe fruits, which the system required. In these cases the use of Opium is only of limited and temporary value. It may be used as directed before, to relieve pain and irritation, but its continued use impairs digestion.

It should be remembered that diarrhœas are sometimes prolonged by the presence of hardened feces; in these cases Epsom Salts or Castor Oil should be given in tablespoonful doses every six hours, until a free motion is obtained; or injections of a quart of warm water frequently repeated until hardened feces cease to be discharged. Large doses of Bismuth, from twenty to thirty grains repeated two or three times a day is a most valuable remedy in continued diarrhœa, and is not accompanied by any disagreeable effects. It can best be given in some milk. Chronic diarrhœa is frequently of malarial origin. In these cases Quinine in five grain doses, two to four times a day, is curative without any other remedy. Quinine is frequently required as a tonic, in doses of two or three grains, three times a day. For the same purpose the bitter infusion of Quassia, Gentian, or Columbo, alone or combined, two ounces to the pint of boiling water, dose a tablespoonful three times a day, are useful. One or two grains of Pyro Phosphate of Iron may be combined with each dose of the bitters, or Quinine if the patient is much reduced. The addition of Pepsin in doses of five or ten grains is frequently a great help to digestion.

In chronic diarrhœa Bismuth, given as before mentioned, occupies the first rank; anodynes before described may be given with it, but only as required to relieve pain or irritation. Sugar of Lead may, in rebellious cases, be combined with the Bismuth, with or without the anodyne, in doses of one to three grains. The vegetable astringents blackberry-root, Logwood, Catechu, Kino, have been in their turn found useful. As their efficacy depends on the presence of tannin, I prefer to use it. It can be given in doses of ten to twenty grains in syrup, and repeated every few hours, and may be combined with Bismuth, or an anodyne, or both.

One of the most effective prescriptions in chronic diarrhœa is the following: Take of Sulphate of Copper one grain, Sulphate of Morphine

one grain, Sulphate of Quinine twenty-four grains. Make a mass and divide into twelve pills. Take one pill three times a day.

In some rebellious cases, the following is a highly useful combination: Take of Ergotine (Watery Extract) twenty grains, Extract of Nux-vomica five grains, Extract of Opium ten grains. Mix well, and divide into twenty pills. Take one pill every four or six hours.

If the druggist is not known to be skillful and careful, probably the following better be used instead. Take of fluid Extract of Ergot two ounces, Tincture of Nux-vomica three drams, Deodorized Tincture of Opium three drams. Take a teaspoonful four or six hours apart.

In the treatment of chronic diarrhœa, it becomes necessary to change the remedy occasionally, as in some instances the system becomes habituated, in a measure, to its use. It is not, however, best to change a remedy as long as it is proving efficacious.

THE DIARRHŒAS OF CHILDREN DEMAND SEPARATE CONSIDERATION. Those cases having the appearance of blood in the stools will be treated under the head of *dysentery*. If the roundness of the figure and firmness of the flesh is maintained, it shows that nutrition is sufficient and the diarrhœa is not harmful. On the other hand, if the child is beginning to waste, or the flesh become flabby, immediate treatment is required. Many of these cases are caused from poor food. If the child is at the breast, it may be the mother works too hard and so impairs the quality of the milk, or it is insufficient, and creamy cow's milk should be given in addition. A little penetration, guided by common sense, will discover the cause and correct it by better hygiene. A green or irritating stool shows the need of an alkali, lime water by preference, or a little prepared Chalk or Soda.

When lumps or mucus pass in the stools a laxative is needed. For this purpose half a teaspoonful of Castor Oil, or syrup of Rhubarb a teaspoonful. Previous constipation also demands these laxatives or the following may be given: Take of Epsom Salts one dram, Tincture of Rhubarb one dram, Syrup of Ginger one dram, Cinnamon Water or water nine drams. Mix. Dose a teaspoonful three times a day for a child a year old.

If there is no improvement from this treatment we must rely on astringents and alkalies. If the evacuations are frequent and the child weak, no laxative should be given, but astringents should be used from the first. Often much precious time is lost by not following this rule. The physician finds generally when he is called that opiates and astringents are needed exclusively, attention being also given to hygiene. The Compound Powder of Chalk and Opium answers the indications and may be given in doses of three grains every other hour to a child a year old. I often use the following: Take of Compound Powder of Chalk half a dram, Bismuth one dram. Mix and divide into ten papers. Give one powder three hours apart until the diarrhœa is checked. Or the following may be used. Take of Paregoric two drams, Tincture of Catechu two drams, Chalk Mixture one ounce. Mix, and give a teaspoonful every three or four hours to a child a year old.

Often the diarrhœa is due to, or aggravated, by imperfect digestion; it is well to give Pepsin and Subnitrate of Bismuth. Take of Pepsin



one dram, Sub-Nitrate of Bismuth one dram. Mix, and divide into twelve powders. Give one immediately after the child has taken milk or food. They can be given in milk or syrup.

In children over two or three years of age the treatment is similar to that for adults, making allowance for age.

### HOMŒOPATHIC TREATMENT.

DULCAMARA should be given in diarrhœa, occurring in summer, from cold. Particular indications for its use are the relaxation of the bowels, being attended with colic or cutting pain, chiefly in the region of the navel; the evacuations being liquid, *slimy*, and *yellowish* or *greenish*, generally coming on *at night*, and sometimes being attended with nausea or vomiting; want of appetite, and great thirst; paleness of the countenance, and lassitude. This medicine may, also, be judiciously administered in many cases in which the relaxation of the bowels *affords no ostensible specific or characteristic indications* for any particular remedy.

*Dose:* For adults, eight globules to each two table-spoonsful of water, give a teaspoonful after each evacuation, until distinct relief or change. Children, one-half dose for an adult, given in the same way. But if only partial relief should ensue, in acute (casual) cases, in six hours after the second dose, or in chronic cases in twelve hours after the sixth dose, proceed with the next or study other medicines.

BRYONIA should be given in cases of diarrhœa arising from the before-mentioned causes, and attended with many of the symptoms noted under *Dulcamara*, when that medicine has failed to afford the required relief, particularly if the looseness is liable to be aggravated after a meal, or after drinking, and the stools are passed almost involuntarily, and portions of undigested food are perceptible in the motions; also when looseness is experienced after partaking of *milk*. In *looseness of the bowels occurring during hot weather*, when we cannot trace the cause in any errors of diet, requiring other remedies, this medicine is further indicated, and especially so in the following instances; diarrhœa, from checked perspiration or being overheated—*cold drinks*—a chill from remaining in any cold, exposed situation, or in draughts—or from exposure to an easterly wind. When this affection has been produced by passion, particularly in individuals of what is called a bilious temperament, *Bryonia* is, again, a most useful remedy. It may also be remarked that the relaxation of the bowels, arising from drinking impure water, or water strongly impregnated with vegetable substances, when heated, has frequently found relief in this medicine.

*Dose:* In casual or chronic cases, and in all other respects, as more particularly directed for *Dulcamara*.

CHINA.—Looseness in consequence of indigestion, particularly if occasioned by partaking of fruit or flatulent food, such as vegetables; evacuations very profuse and sometimes attended with but little pain; and when the discharge comes on immediately after *partaking of food*, or *especially during the night*; evacuations liquid and *brownish* and sometimes containing portions of *undigested* food; it is, in some instances, further indicated when considerable spasmodic or colic-like pain is present with flatulence, want of appetite, thirst and great weakness; and is also valu-

able after improper treatment of this affection, when considerable debility remains.

*Dose:* If singly, in *casual* cases (for adults), of a solution of eight globules to two tablepoonsful of water, give a teaspoonful after every motion, until amelioration or change. In the like cases for children, a solution of three globules to two tablepoonsful of water similarly administered by teaspoonsful. If in *alternation* with Ferrum, a similar solution (separately) of each medicine (as distinctly stated for adults and for children), of each of which the like dose should be given, the one twelve hours after the other, in rotation, until amelioration or change. In *chronic* cases, if *singly*, three globules in a teaspoonful of water (for adults), or two globules in a teaspoonful of water (for children), morning and evening, every other day, until amelioration or change.

FERRUM-M. may be advantageously given, in alternation with China, when the evacuations are partly composed of *undigested* food, and pass without pain. This remedy may, however, be administered alone, when the discharge from the bowels is unattended with pain, or there are pains in the back and posterior passage, paleness of the face, watery evacuations—or looseness particularly observable at *night*, or after *eating* or *drinking*—loss of flesh, alternate absence of appetite and voracious hunger, distention of the belly without flatulency, spasm of the stomach, continued thirst, and weakness of the eyes, with great weakness of digestion.

*Dose:* In all respects, whether for casual or chronic cases, and whether singly or in alternation with China, as directed for the *latter medicines*.

CHAMMOMILLA is a remedy, as already stated elsewhere, particularly useful in children, either at the time of teething, or at a more advanced period, when the affection has been excited by checked perspiration; and it is further particularly indicated when the evacuations are *watery, bilious, green, yellow or slimy*, or of a fetor resembling rotten eggs; when there are *fullness at the pit of the stomach*, severe colic or spasm, pain, distention, and hardness of the belly, bitter taste in the mouth, foul tongue, thirst, want of appetite, *bilious vomiting* and flatulency (in infants), attended with restlessness and screaming, and drawing up of the limbs towards the stomach.

*Dose:* Of a solution of eight globules to four tablepoonsful of water, give a teaspoonful after every motion, until positive amelioration or change; or in patients of a weakly habit of body, if this appears inadequate to effect a cure (although the symptoms be analogous) and if, after repeated administration and *temporary effect* the symptoms recur in all their former violence, consider Sulphur.

IPECACUANHA is indicated by looseness arising from indigestion, particularly if caused by imperfect mastication, and attended with nausea and vomiting, paleness of the face, *weakness*, and desire to retain the recumbent posture (in the case of children).

*Dose:* Four globules, in a teaspoonful of water, after every motion; but if, after three doses have been given, this medicine appears to afford only partial relief, consider the two following remedies, and proceed with the one or the other, according to the distinctive symptoms present.

PULSATILLA should be administered six hours after the third dose of Ipecacuanha, if the latter affords only partial relief. It is also one of the

best remedies in *simple looseness* of the bowels, arising from *errors of diet*, such as indulgence in *acids, fruits*, or rich, indigestible food, attended with foul tongue, and other symptoms of deranged digestion, as stated in the article on INDIGESTION. Another remarkable indication for this remedy is, *one evacuation differing from another in color*.

*Dose*: Six globules in a teaspoonful of water, after every motion, until amelioration or change.

RHEUM is to be preferred to Pulsatilla, and should be employed after Ipecacuanha, or even before that medicine, when the *sour* smell of the evacuations is a predominant symptom. In general, however, it may be advantageously employed, especially amongst children, when the symptoms, in a great measure, resemble those of Chamomilla, but the pain is not so violent, and the evacuations have a *sour* smell; paleness of the face is also an indication for this medicine.

*Dose*: Six globules in a teaspoonful of water; or, for children, three globules in a teaspoonful of water, after every motion.

MERCURIUS. When the diarrhœa arises from a *chill*, and the motions are copious, *watery, slimy*, frothy, bilious, or *greenish*, or streaked with blood, and cause a smarting or burning sensation on being evacuated; also, when there is painful straining before, during, and after evacuation, frequently followed by protrusion of the lower intestine; severe, cutting pains; moreover, nausea and eructation, *cold perspiration*, trembling or shivering, great lassitude, and disposition to fainting; evacuations containing undigested substances.

*Dose*: Of a solution of six globules to three tablespoonsful of water; give a teaspoonful after every motion, until distinct amelioration or change.

NUX-VOMICA. *Scanty* evacuations or motions, consisting of slime and blood, attended with straining and *great weakness*; flatulency, and violent, cutting pains in the region of the navel; diarrhœa, alternating with constipation. For some of the accompanying symptoms, the reader is referred to the indications mentioned respecting this remedy, in the article on INDIGESTION.

*Dose*: Six globules in a teaspoonful of water, every two hours, until amelioration or change.

ARSENICUM. Autumnal diarrhœa, or looseness arising from errors in diet, acids, fruits, cold drinks, ices, or from a *chill*, etc., the characteristic symptoms for its employment are: *watery, slimy, greenish*, or *brownish, corrosive, burning evacuations*, with *violent colic, excessive thirst, emaciation* and *great weakness*, and when the affection is more liable to come on at night, or after *eating or drinking*. This is, also, a most important medicine for the treatment of the Bowel Complaint of children, as hereafter, separately, considered.

*Dose*: Of a solution of six globules to two tablespoonsful of water give a teaspoonful every half hour (in very acute cases); or every hour (when the symptoms are modified by intervals of respite), until amelioration or change. If in *alternation* with Veratrum, of a similar solution (separately), of each medicine, give, first, two doses (as just stated), of the one, then pause an hour, and continue with two doses of the other, similarly. If *singly*, however, and only partial relief ensue within half an hour, or an hour (respectively), after the third dose, proceed with the next medicine.

VERATRUM should be employed half an hour or an hour (according to the length of the intervals) after the third dose of Arsenicum, when similar symptoms occur which have not yielded to the previous use of the latter. Veratrum is, moreover, especially appropriate in cases in which the complaint is attributable to atmospheric causes. Veratrum and Arsenicum are important when excessive exhaustion accompanies the complaint.

*Dose:* In all respects as directed for Arsenicum.

RHUS-TOXICODENDRON. Lumpy or pap-like diarrhœa, coming on only at night, and preceded by colic, which disappears after each evacuation; looseness of the bowels occurring after a *thorough wetting*, or alternately with constipation.

*Dose:* Three globules in a teaspoonful of water, after every motion, until distinct amelioration or change.

#### DIARRHŒA ASSOCIATED WITH CONSTITUTIONAL DEBILITY.

SULPHUR is a most valuable remedy in diarrhœa, particularly during the night, occurring in persons of a scrofulous habit, or in very obstinate cases. In adults predisposed to piles, or in children, when the looseness of the bowels is attended with excoriation and with papular eruptions, it is particularly efficacious; also in cases where the slightest cold brings on a relapse or an attack; or when *milk* disagrees and causes a looseness.

*Dose:* Against the prevailing acute symptoms, of a solution of six globules to two tablespoonsful of water; give a teaspoonful every six hours, until the frequency of the motions are diminished. Subsequently, give six globules, in a wineglassful of water, every morning (fasting) the first thing, for ten days, unless collateral symptoms, meanwhile, occur, requiring other treatment; after which, pause four days, resuming the course, if necessary, as before.

SEPIA is to be preferred in obstinate cases of diarrhœa, occurring amongst females; especially when associated with predisposition to hysterical attacks, megrims, whites, sudden sweats, or flushes of heat and frequent attacks of shivering or shuddering, chiefly during stools.

*Dose:* In every respect as directed for Sulphur, continuing the course in like manner, until permanent amelioration or change.

DIET AND REGIMEN. Acids, or acidulous wines, beer, coffee, strong tea and fruits, whether raw or cooked, should be carefully avoided. Solid food is likewise proscribed, during the prevalence of an acute attack, as tending to keep up the intestinal irritation; and gruel, fresh milk, (unless it should be known to disagree with the patient), broths, and light mucilaginous food should be substituted.

The majority of vegetables are objectionable, but potatoes in particular.

In every severe case, indeed, (during the prevalence of the attack) little more than thin arrow root or gruel should be taken. In milder forms of the complaint, well-boiled rice, moistened with good gravy, may be rather serviceable than otherwise.

Beef tea (with or without the addition of a teaspoonful of isinglass to the half-pint) may, in some cases, serve materially to assist the operation of the medicines. When the attack is subsiding, and for some time after-



wards, young meat (such as veal or lamb) should be avoided; and sound, tender mutton, plainly roasted, will be found, generally speaking, most easy of digestion. Fish should be avoided.

Above all, the patient should guard against indulging a craving appetite, and eating too freely, or overloading the stomach.

In protracted cases, attended with debility, but no symptoms of inflammation or ulceration, generous, easily digestible food, and sometimes a little wine, or wine and water, must not be withheld. In such cases, a basin (half a pint) of beef-tea, with the addition of a teaspoonful of isinglass, and a few slips of toast taken daily, about three hours after breakfast, will usually prove a useful accessory. The use of a flannel bandage round the stomach, is often of service, especially for delicate children. In every case, the clothing should be warm; exposure to moisture, and especially to having the feet wet, should be avoided; fine woollen stockings or socks, and stout shoes, should be warm.

Change of air will generally be of service to the convalescent. When diarrhœa prevails as an epidemic, as is not unfrequently the case towards the fall, all these precautions, which may or may not be essential under other circumstances, become indispensable.

THE HOME REMEDIES.—Take of Mayapple Root, pounded, one teaspoonful; White Oak Bark, pounded, or, if dry, powdered coarsely one teaspoonful; boiling water a pint; steep near fire for an hour or two, and sweeten with white sugar. Dose: A spoonful after each motion of the bowels. A little burned brandy, added, helps this. This is very valuable.

Take five or six clean corncobs, burn them, on a clean fire, to a coal; drop the cob-coals in two pints of boiling water; as soon as cool, take a tablespoonful every three or four hours. This is specially valuable where there is *much bloating*, or the evacuations are very offensive, the eructations tasting like what has been eaten.

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### CHOLERA MORBUS.

CHOLERA MORBUS is a disease common in warm seasons and especially in warm climates. The principal features of the disease are vomiting, purging, and severe griping pains in the abdomen.

SYMPTOMS.—The attack is occasionally preceded by chills, headache, giddiness, and a numb sensation in the limbs, but more generally the attack is sudden, commencing with nausea and distress at the stomach, succeeded by violent gripings in the bowels; these are followed by frequent vomitings of a thin, dirty-yellowish, whitish, greenish, or even colorless fluid, with discharges from the bowels of a similar character to that vomited up, and which occur as frequently as the vomiting. During the intervals between the vomiting and purging there is much nausea and uneasiness at the stomach; but in some cases a sensation of relief is afforded by the discharges and the patient lies in bed, much fatigued, but apparently free from pain and distress.

These attacks of vomiting and purging usually take place every ten

or twenty minutes, being either simultaneous, or the vomiting immediately followed by the discharge from the bowels or else the reverse.

Sometimes the pain is so severe as to cause the legs to be drawn up or even to cry out.

Generally there is great thirst, but as soon as any liquid is swallowed it is ejected; the tongue is dry, the urine high-colored, deficient or suppressed, the pulse rapid, soon becoming small and feeble. If the disease is allowed to progress unchecked the pulse sinks, the extremities become cold, the countenance pale and indicative of much suffering, the breathing hurried, cramps in the limbs, hiccup, a cold clammy sweat breaks out, great prostration and death. The disease frequently proves fatal in twenty-four hours, and, when malignant, even in a few hours; sometimes it subsides spontaneously.

Sometimes patients with CHOLERA MORBUS complain of a great burning sensation internally, and in the more malignant forms of the disease, it is not uncommon for the last discharges to resemble the "rice water" evacuations of Asiatic Cholera.

Cholera Morbus may be known from Diarrhœa and Dysentery by the character of the discharges from the bowels, which in this are of a purely bilious nature, not mixed with blood or mucus, and with scarcely any fecal matter.

CAUSES.—Cholera Morbus is owing to an irritation of the stomach and bowels, and a greater or less derangement of the liver, and is ordinarily caused by improper substances taken into the stomach, as unripe fruit, acids, much fat food, certain kinds of fish, lobsters, unfermented cider, improper use of alcoholic drinks, or any article that will irritate the mucous membrane of the stomach and bowels by undergoing an acid fermentation. It is also produced by exposure to sudden changes by sitting in a draught of cool air while in a state of perspiration; by excessive heat rendering the bile more acid, or secreted in unnatural quantities, or by malarial influences. Persons of gross habits, or intemperate in eating and drinking and those of sedentary habits are the most subject to it.

PROGNOSIS.—When the symptoms gradually improve, vomiting ceasing or becoming less frequent and distressing, with a gentle moisture upon the surface, succeeded by sleep, they are favorable. But frequent and severe vomiting with great prostration of strength, swelling of the bowels, intermittent pulse, cold, clammy sweats, short, hurried breathing, constant hiccough, spasms of the extremities or convulsions are unfavorable symptoms.

#### ALLOPATHIC TREATMENT.

Sporadic Cholera occurs independently of epidemic influences and is commonly called Cholera Morbus. If the vomited matters have not contained undigested food (the presence of which is probably causing the trouble) a mild emetic should be given, if there is reason to suppose such irritating material still remains in the stomach. For this purpose a teaspoonful of ground mustard in a glass of water is as appropriate as any other remedy, and has the advantage of being almost always on hand. Other mild emetics may be given. Almost always the contents of the

stomach are expelled during the first acts of vomiting, and an emetic is almost always uncalled for, and in that case will always do harm.

The next indication is to overcome the vomiting and purging. This is best effected by the hypodermic injection of one-eighth to one-fourth of a grain of Morphine at the hands of your physician. This quickly effects the object. Other forms of opium may be used by the mouth, if the physician can not be procured. A third of a grain of Morphine placed dry on the tongue will generally prove efficient. Thirty drops of Laudanum is also an appropriate dose for the relief of the immediate symptoms. The dose ought to be repeated in an hour, if the vomiting and purging have not ceased. If the remedy is vomited as soon as taken it should be immediately repeated. In the absence of a physician, if the administration of this by the mouth is not tolerated, a teaspoonful of Laudanum in a tablespoonful of thin starch or milk should be given by injection into the bowels.

It should be remembered that this is a powerful remedy to *handle* and if carried too far there is danger of opium poisoning.

Another important point in the treatment of Cholera Morbus is to withhold liquids as far as possible. The excessive thirst leads to an intense craving for drink. The presence of liquids in the stomach prolong the vomiting. The thirst may be relieved by letting small lumps of ice melt in the mouth, or ice water may be swallowed, but only a tablespoonful at a time. The immediate success of treatment depends largely on the strict compliance with this rule.

The common practice is to meet the prostration which follows the attack with small quantities of brandy or other spirits and water. They do not appear to be usually necessary.

The appetite should be both carefully and moderately indulged after an attack.

Many other methods of treatment are in vogue, but are not given here, because this one is habitually successful, and the best suited of any for employment by those deprived of the attendance of a physician.

In epidemic cholera (Asiatic), the use of Opium is well suited for use during the preliminary diarrhœa, but is decidedly inappropriate when collapse has occurred. After this stage has passed, the best results have been produced by the use of Chloroform and Camphor, internally.

During the cold stage, the hypodermic injection of Hydrate of Chloral is the best treatment discovered so far.

#### HOMŒOPATHIC TREATMENT.

IPECACUANHA corresponds to the less violent attacks as long as the discharges have a bilious tinge, and the vomiting and retching are very severe.

*Dose:* Six pills of the 2d or 3d decimal dilution every fifteen to thirty minutes.

VERATRUM ALBUM is particularly adapted to a case where the evacuations are colorless; these cases are always the most difficult to manage. This characteristic of the evacuations may be expected with tolerable certainty, if the disease sets in at once with violent, copious and frequent vomiting and the accompanying diarrhœa is equally violent.

*Dose:* As for Ipecacuanha.

## FEVERS.

## GENERAL REMARKS.

*In all forms of acute disease, fever is present;* in fever, properly so called, there is generally functional disturbance, accelerated action of the blood circulation with the participation of the nervous system, and a marked tendency to an increased development of heat. The symptoms common to most fevers are, at first, a feeling of coldness or shivering, then heat, accelerated pulse, thirst, restlessness, and languor. Fever, also, possesses the property of passing from one (variety) species into another. Thus inflammatory fever may pass into a low typhus, or on the other hand, a simple fever, by injudicious treatment, may be changed into an inflammatory one; and that again assume the intermittent form; also, one attack may, if miserably mistreated, present all these different phases.

Fevers terminating fortunately, and running a regular course, may be divided into *five stages*: the accession, (or first appearance), increase, crisis, decrease and convalescence.

When the *result is fatal*, it may arise from a metastasis, (changing from one part to another more vital part), the exhaustion of the vital energy of the patient, or the disorganization of some important part of the body.

The belief in *critical days*, is of very ancient origin, though there is some difference in the calculation of physicians upon this point. Some counting from the day the shiverings declare the onset, others from the first hot fit; except in cases where a marked periodicity exists, as in ague, such distinctions are of little value, because the treatment is directed to forwarding the crisis, and thereby materially shortens the duration of the disease, and changing its virulence, so the value of the *counting* for the critical day, is very materially lessened. The *best course* is to watch the case closely, take careful note of the symptoms, and select with great care the remedy pointed as the best to meet successfully that condition. By so doing, you will be most certain to have the pleasure of seeing your patient come safely through the attack, and arrive speedily at a state of perfect health.

A CRISIS may make itself known by diarrhoea, profuse perspiration, hemorrhage, or increase or alteration of other secretions, or by the appearance of an eruption, after which, if the turn is favorable the skin becomes moist and resumes its functions and the pulse returns to its usual standard.

Fevers have been differently classified by different medical writers. The arrangement we shall adopt is as follows: Simple irritative fever, inflammatory fever, typhus, putrid, gastric or bilious, intermittent and eruptive fevers, such as scarlet fever, measles, etc. Although I have, for convenience in describing fevers and their remedies, so named them, I do hope no one will commit the error of treating the disease only by its name. *Study carefully every case, and treat it according to its own individual peculiarities, as shown by its symptoms.*

CAUSES OF FEVER.—It cannot be denied that there exists, in certain individuals, a peculiar predisposition to acute diseases. The sanguine, nervous and bilious temperaments (see temperaments, page 30), possess



this susceptibility in a more marked degree than the phlegmatic. The exciting causes are numerous; miasms, epidemic influences, contagion, powerful mental emotion, derangement of some important organ, external lesions, excess or errors in diet, heat or cold, eruptions which have gone in—in fact, anything that causes derangement of the equilibrium of the system may produce fever.

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## FEVER.

### GENERAL TREATMENT AND DIET.

The great essentials, in the treatment of fever, are :

Perfect rest—mental and bodily.

Pure air and a cool apartment; the temperature of the sick room should be kept as near 60° as possible.

Featherbeds should be avoided, and mattresses substituted when practicable; let the bedclothes be light but sufficient.

Nature herself generally prescribes the diet, taking away appetite, while the thirst present is undoubtedly her loud and well considered call for water or fluid of some kind. Water is the best diluent; no solid food, broth or even gruel is permissible where the inflammation runs very high, and very great caution is to be observed in allowing gruel and weak broths during the decrease of the fever. An error here, often causes mischief which cannot be repaired; it is always better to err a little on the side of abstinence, than on that of indulgence.

Toast-water, or barley-water, or rice-water, sweetened with a little sugar, and flavored with raspberry, strawberry, orange, or, above all, lemon, may be allowed *frequently*, and only a little at a time.

Avoid, until recovery is complete, any article of diet which might in the least degree over-tax the weakened digestive organs. Fruits fully ripe in almost any form are not at all likely to do any injury.

### GASTRIC OR BILIOUS FEVER.

This is a form of fever in which, as its name implies, the digestive organs are chiefly affected. It somewhat resembles typhus, but it is distinguished from the latter by the absence of nervous symptoms—although, when it assumes a torpid character, these are occasionally developed—by the absence of the pressive aching pains in the back of the head; and by the absence of disturbance or derangement in the senses of sight and hearing; further, that the pain in the right side of the belly, which is so constant a symptom in typhus, is not a feature of this disease.

Fevers of this description have no definite course or duration. They not unfrequently fall short of the particular course to which the definition is especially appropriate, as in such cases as result merely from indigestible substances, without actual increase in the discharge of (acid) bile. In such cases the successful effort of nature to expel the obnoxious substance (as by vomiting or purging, or both) is often sufficient to constitute a perfect resolution, and convalescence succeeds. In other cases nature is thus but partly relieved, the whole circulative system having

become essentially involved, and the fever continues until some other crisis (as of sweat or urine) succeeds. Thus, Gastric Fever, if associated with mere foulness of the stomach, may run its course to perfect resolution in a few days; or, if the lining membranes of the stomach or bowels be seriously affected, or the action of the liver be much deranged, and there be BILIOUS FEVER, PROPERLY SO-CALLED, the fever may continue for weeks (if not properly or successfully treated), or may assume a highly inflammatory character, or degenerate into NERVOUS or even *Putrid* or into *Chronic* or *Hectic* Fever. On the other hand, again, it may result in transitions of various character—the superficial membranes, either of the throat or external surface (the skin) may become affected, and *Eruptions* of various kinds, *Abscesses*, etc., may ensue.

*Complications and their treatment.* In the case of any such complications occurring, the treatment must be conducted according to the special directions afforded in the separate article respectively devoted to the disease in question.

*Predisposing Causes.* The predisposing causes may be identified in continued exposure to *great heat*—whereby the rapid sympathy existing between the skin and the liver and stomach, has conveyed to those organs an undue degree of irritability; exposure to *excessive moisture* of the atmosphere, particularly extreme accumulation of condensed vapors (heavy dews) over a reeking, heated soil, which continues to emit exhalations; exposure to great (especially sudden) *transitions of temperature*, particularly from great heat to comparative coldness, or to the *alternation of heat and cold*; whence it follows, that, under such circumstances, this disease may assume an ENDEMIC or EPIDEMIC character. The more particular and predisposing causes are: *weakness of the stomach*, that is, a morbid sensibility of the lining membrane, and overdue *irritability of the liver*; habitual debauchery or excesses, sedentary habits, or anything, in fact, which may occasion derangement of the stomach, as considered in the article on “Indigestion.”

*Exciting Causes.* The presence of obnoxious, indigestible, or irritating matters in the stomach or bowels—which cannot be dislodged by the *ordinary* action of those organs—either in the shape of excessive reception of food, whether or not in itself of an indigestible character, or simply the reception of indigestible substances in however small a quantity, or in the shape of altered or excessive internal secretions, such as bile. Other exciting causes are, taking cold, emotions, such as anger, grief, care, anxiety, etc., acute diseases; or, in fact, any cause of general irritation when acting upon persons already *predisposed* to this complaint by such conditions as have been mentioned above.

SYMPTOMS—of which the following are the principal: sensation of fullness and weight in the region of the stomach, or flatulent distention, with inclination to vomit; offensive, flatulent eructations, and sometimes vomiting of food and tenacious phlegm mixed with bile; thickly furred, dirty-yellow tongue; belly soft; bowels costive; but in the advanced stage of the disease the evacuations are often very offensive, and contain portions of undigested food; frontal headache; languor; sickly and distressed expression of countenance, with yellow discoloration of the white of the eyes; more or less chilliness, succeeded by heat and dryness

of skin: pulse quick but soft, sometimes intermitting or irregular, particularly the latter; urine thick, cloudy, and dark colored.

When bilious symptoms are markedly predominant, all the symptoms commonly appear in an aggravated form; the heat of the skin is very considerable, and the restlessness and thirst are excessive (the patient expressing a constant desire for acid drinks.) The region of the stomach is much distended with flatulency, but in addition to this symptom, the following are more or less marked; the tongue is covered at first with a pale yellow fur, which gradually assumes a deeper or brownish color; the taste and eructations are bitter, and the substance vomited consists of a greenish, bilious matter; the bowels are either confined or relaxed, the motions presenting in the latter case a yellow, green, or brown color; the face exhibits an earthy, somewhat jaundiced aspect; sometimes there is also a greater or less degree of sensibility, hardness, tension and burning in the region of the liver; the urine is dark-brown, bilious; the pulse full, accelerated, intermitting or double.

#### ALLOPATHIC TREATMENT.

RE-MITTENT FEVER (commonly called "bilious fever"). It is to be borne in mind that the exacerbations of fever, in this disease, are much longer than in intermittent fever or ague, and that the period of remission (diminishing) of the fever is of much shorter duration. It is not as convenient to get the physiological effect of anti-periodic remedies during the remission (while the fever is down) as is the case in intermittent fevers.

The one remedy which, *par excellens*, is a specific in this fever, is the Sulphate of Quinine, though the other preparations of Peruvian Bark hold a valuable place.

As soon as it is discovered that the disease is remittent fever, by the occurrence of a distinct diminution of the heat (the degree of fever) as shown by the fever thermometer in the axilla (under the arm), the patient should at once be given Quinine until its specific effect is produced, viz.: a slight deafness, a slight ringing in the ears or roaring in the head. This is best produced by giving large doses, not very frequently repeated. Ten grains of the Sulphate of Quinine, in solution, repeated every six hours, until the characteristic effects of the Quinine are produced, is a good practice in this disease or in ague. If this dose is not sufficient to produce the effect or prevent the paroxysms of fever, the dose may be increased to fifteen or even twenty grains. An eminent authority advises the administration of twenty or thirty grains, at a single dose, once or twice a day, until the effects are produced. Other physicians give the remedy in doses of from three to six grains every two or three hours. It requires about five hours after its administration for the maximum effect of quinine to be reached, so that it seems to me unnecessary to repeat the doses any oftener than that; and, on the other hand, it seems unnecessary to wait twelve or twenty-four hours before repeating the dose, if the desired end has not been attained.

For the solution of Quinine, the following is a suitable formula: Take of Sulphate of Quinine four scruples (eighty grains), water five ounces, Aromatic Sulphuric Acid a dram and a half. Mix. A fair-sized table-

spoonful will contain ten grains. The excessive bitter taste of the solution is very much obscured by chewing some chocolate or extract of licorice, and taking the medicine while the mouth is still coated with the chocolate or licorice.

The remedy may be taken in powder, easily, by enveloping it in a moistened medicine wafer, or enclosing it in jujuba-paste capsules.

Quinine can be made into pills, for immediate use, by moistening the powder with Glycerole of Starch, or Aromatic Acid, rolling out the mass and dividing into pills. If the acid is used, the operator must be expeditious, as the mass soon hardens.

Sugar or gelatine-coated pills of Quinine may be used, and are an elegant form for the administration of Quinine, but slower in its action. They are liable to become hard with age, and so, unfit for use. Before buying these ready-made pills, one of them should be cut open; if the pill under the coating is hard, they are unfit for use; if soft, they are good. I have found Wm. Warner & Co.'s and McKassen & Robbin's make uniformly reliable.

This treatment is both curative and abortive. There is no complication can occur in this disease which will prevent the giving of Quinine. If the stomach can not be made to retain the remedy, it should be given by injection by the bowel. Once in twenty-four hours, is often enough to repeat the injection. The dose for this purpose is generally thirty to sixty grains. It may be mixed with Glycerine, Milk, or thin Starch. Thirty drops of Laudanum should be added to the mixture for the injection. If there is a disposition to expel the injection, firm pressure should be made on the anus (opening of the bowel) with a towel or napkin under the hand. A four or eight-ounce hard-rubber syringe is preferable for the purpose.

Time need not be lost before the administration of Quinine for the action of cathartics, or any other preparatory treatment. Constipation should be relieved by the laxative effect of an Aloetic pill or two or three Compound Cathartic pills, or by an injection of tepid water.

This plan of treatment will, in a large proportion of cases, succeed in arresting the disease, but if the disease should continue the treatment thereafter is essentially the same as in other continued fevers, which is more especially given in connection with typhoid fever. The antiperiodic remedies should be continued, but in more moderate doses. Five grains of Quinine two or three times a day, will probably suffice, but if the fever should run high the dose should be increased sufficiently to moderate the fever.

When the fever continues high after the full effects of Quinine are produced, Fowler's Solution (Solution of the Arsenite of Soda) may be given in doses of one drop three or four times a day. It may be given in water and is useful if the delirium lessens, the skin becomes moist, and the tongue clean. When this disease is associated with typhoid fever (known as Typho-Malarial Fever) Fowler's Solution seems particularly serviceable.

Headache and delirium are due to the intensity of the fever and much good may be done by applying cold to the head by frequent bathing with



cold water, or if the heat of the head is very intense with a sack or bladder of pounded ice.

Immediate relief from the intensity of the fever may be derived by sponging the surface of the whole body with tepid or cold water according as the fever is moderate or high. The degree of cold should be governed by its agreeableness to the patient. The spongings may be repeated as often as the patient desires. If the fever rises as high as 104° F. or higher as shown by a fever thermometer in the armpit, the application of the cold wet sheet (*cold wet pack*) will prove serviceable. For its application a sheet or linen is wrung out of cold water and laid smoothly on a hard mattress; the patient then lies or is placed upon it with his head upon a pillow. The sheet is then drawn over the body, one side at a time and tucked under the opposite side. Some blankets or comforters are then closely applied over the body. The patient may be placed in the wet pack several times a day and allowed to remain in it from five or ten minutes to an hour, according to the state of the temperature. The effect of cold water is only temporary and the treatment with quinine or other preparations of bark, must not be delayed or neglected. Water should not be applied to the body if the patient is sweating.

Nausea (sickness at the stomach) and vomiting may sometimes be relieved by laying a cloth previously dipped in ice water and folded over the stomach or by a mustard plaster. Doses of one drop of Creosote or Carbolic Acid in water frequently give relief. Bismuth and Oxalate of Cerium are generally successful. Take of Subnitrate of Bismuth a dram, Oxalate of Cerium half a dram. Mix, and divide into six papers. Give one every hour or two. The powder can be taken dry on the tongue and swallowed with a little water. Milk with one-third part of lime water can generally be taken by the stomach with benefit. Should the patient need nourishment and the stomach not tolerate food, nutritious injections should be given. Strong beef tea made with one pound of finely chopped lean beef, to a pint of cold water, by heat (the temperature should be raised to 160°.) The temperature should be maintained at that for four hours, water being added from time to time to keep the quantity at one pint. One-fourth of this can be given by injection or one-eighth by the mouth. Milk may also be given by injection. To the beef tea fifteen drops of dilute Hydrochloric Acid and two teaspoonsful of Glycerole of Pepsin, or two-thirds of a teaspoonful of powder of Pepsin should be added. If milk is used the acid should be omitted. Twenty drops of Laudanum should be added to the injection, if the rectum is irritable, and the injection retained by firm pressure with the hand over a towel. Vigilance and restlessness will call for anodynes. For this purpose Tincture of Hyoscyamus in doses of one or two teaspoonfuls may suffice. If not, ten to twenty drops of Laudanum may be added. A pill of one grain of Extract of Hyoscyamus and half a grain of Opium may be used.

Protracted cases require the same treatment with more attention given to feeding the patient. Fifteen drops of Dilute Hydrochloric Acid in sweetened water, three or four times a day. It assists the digestion and relieves the dryness of the mouth and throat. During convalescence, tonic doses of quinine or bark and iron should be taken. A dessertspoonful of the elixir of bark and iron is useful. Probably the Citrate of Iron and

Quinine, or the Citrate of Iron and Cinchonidia in doses of three to five grains dissolved in Orange Flower water, taken threetimes a day, answers the purpose the best. A tea (infusion) of Dogwood, Columbo Gentian Quassa Boneset, and Wild Cherry and Poplar, is useful, taken before meals. The Tincture of Iron in doses of fifteen drops in sweetened water, may then be taken after meals. Should intermittent fever (ague) follow bilious fever, it should be treated as is directed for that disease.

In Typho-Malarial fever the disease should be treated in the first place, as is directed in this article for remittent fever, aside from this the treatment will be as is directed for Typhoid fever.

#### HOMCEOPATHIC TREATMENT.

In simple cases associated with uncomplicated derangement of the stomach, or simple foulness, especially if the affection be casual, and can be traced directly to excess in eating or drinking, or to some particular indigestible substance, if all strikingly *bilious* symptoms be absent, such as those above enumerated, and if there be no bitterness of taste, or bitter eructations, the treatment should be regulated by the directions hereafter afforded in the section on "derangement of the stomach," under the general head of "Indigestion."

In the severer cases, characterized by predominant bilious symptoms, or if the disease assumes an inflammatory character, the ensuing indications may advantageously be consulted.

**ACONITUM. BELLADONNA.** One or both of these medicines, either singly, in succession, or in alternation, will generally be required at the onset of the attack, and if administered appropriately, and in time, may often suffice to arrest the disease; the more particular indications for each are subjoined, which, if only aggregately covered by the combination of both, will serve to point out the necessity for *alternate* administration.

**ACONITUM** is indicated, more especially, when everything recieved in the mouth, in the shape of food or drink, except water, has a bitter taste, or when there is continually a bitter taste in the mouth, the pulse being quick and frequent; when the tongue is covered with a yellow coating; when *bitter* eructations or violent urging to vomit, and retching occur, without discharge, or when there is vomiting of *greenish, bitter*, or slimy matters; also by excessive nausea; suspended evacuations, or frequent, scanty, small motions, attended with much urging; swelling and tightness across the stomach, sensation of heaviness and fullness in the forehead and temples; and if fresh air appears to afford some relief.

*Dose:* If singly, of a solution of ten globules to two tablepoonsful of water, give a teaspoonful every two hours, until amelioration or change. If in alternation with *Belladonna*, dissolve eight globules of each medicine, separately, in a wineglassful of water, and give a teaspoonful, first of one solution, then of the other, so that a lapse of three hours intervenes between the doses, and so on, until amelioration or change.

**BELLADONNA** is indicated when there is violent throbbing of the arteries of the temples, *reeling giddiness*, and intense and unbearable headache, chiefly seated in the forehead, as if the contents of the head would *fall out at the forehead*; dryness of the mouth, and thirst; sometimes *in-*

*cessant* nausea; *tongue* covered with a *thick*, whitish or yellowish coating; sour taste; repugnance to all kinds of food, and even to *drink*: vomiting of food, or vomiting of *sour*, slimy, or bitter matters; suspension of evacuations, or looseness of the bowels, with *slimy* evacuations; quick and full pulse; especially if the head-symptoms be aggravated by moving the eyes, or by movement generally, or by *shaking*, or even by touch, and by the access of fresh air, or a draught, and if they be somewhat relieved when the head is supported or held backwards.

*Dose:* In every respect as directed for *Aconitum*.

NUX-VOMICA is indicated in bilious fever by the following symptoms, amongst others: absence of thirst, or ardent thirst; attended with heart-burn; constant nausea; *bitter eructations*; foul or *bitter* taste in the mouth, the tongue dry and white, or covered with yellow coating towards the root; painful sensation of weight and tightness across the stomach, constipation, with repeated urging to evacuate, without discharge, or looseness of the bowels, with scanty, insufficient, watery, or *slimy* evacuation; spasm of the stomach; great inclination to vomit, sometimes even with empty retching, or vomiting of food; full and frequent, or quick and intermittent *pulse*; great prostration of strength in the first stage, and characterized by *shivering*, occurring with partial heat, or by heat *following*, preceding, or mingling with *shivering*, with or without coldness; coldness principally in the evening or morning, or provoked by the slightest movement with shivering and shuddering; headache with heat of the head; dullness, or confusion of the head, with *reeling* giddiness; buzzing, singing, or tinkling in the ears; rheumatic pains in the limbs and in the teeth; *sallow* appearance of the complexion, sensation of *exhaustion* and weariness; excitable, violent, restless or quarrelsome disposition; sometimes yellowish hue of the white of the eye, particularly of the lower part of the eyeball; great sensibility of light, especially in the morning.

*Dose:* Four globules, dry, on the tongue, or in a teaspoonful of water, every two hours, until four doses have been given, and afterwards, if necessary, every six hours.

CHAMMOMILLA is of eminent service, often after Nux-vomica, in very severe cases in which the last named remedy has failed to arrest the symptoms, when the tongue is *red and fissured*, or when the tongue exhibits *yellow* coating; or when further indicated by:—intense heat and redness of the face (particularly at night), restless and interrupted sleep, bruised pain in the head, with pressure, fullness, and heaviness; inflammatory redness, and burning sensation in the eyes, bitter taste in the mouth; every kind of food conveys a bitter taste; loss of appetite, nausea or eructations; vomiting of greenish, sour, or bitter matters; intense anxiety, and oppression of the chest; looseness of the bowels, with sour-smelling evacuations, having the appearance of *stirred eggs*; or greenish evacuations, or, on the other hand, constipation, with suspended evacuations.

*Dose:* As directed for Nux-vomica.

BRYONIA is particularly appropriate to the treatment of this disease in the hot season. The indications which identify it are as follows:—in-

spid, foul, or *bitter taste*, particularly on waking; *continual thirst*, *tongue* exhibiting a number of blisters, and covered with a white or yellow coating; desire for acids and stimulants, such as coffee, wine, etc., but repugnance to solid or wholesome food; vomiting of bilious matters, particularly after drinking, or sometimes frequent, but *ineffectual retching*; oppressive headache, with sensation of extreme heat, dullness, confusion, and giddiness of the head; constipation of hard difficult stools as if burnt.

*Dose*: As for *Nux-vom*.

PULSATILLA is also a most important remedy in this, as in every other disease in which the digestive organs are particularly implicated,—the tongue being covered with whitish coating; particularly after swallowing food or drink, there is bitter, foul, taste in the mouth; all food conveys a bitter taste, especially bread; *regurgitation of food*; extreme nausea, or inclination to vomit, in *the evening*; excessive accumulation of *phlegm* in the stomach and gullet; vomiting of food or of phlegm, or of bitter or sour matters, more severe *at night*; *acidity* of the stomach; flatulent distention of the belly, with rumbling of wind in the bowels; looseness of the bowels, with discharge of bilious or slimy matters in the evacuations,—or sluggish evacuations, and insufficient activity of the bowels; *splitting* headache, with tightness and compression of the forehead; sensation of weariness and exhaustion, occasioned by the least mental exertion; slowness and fullness of the *pulse* (in general); fits of shuddering and coldness in the evening, or towards evening.

*Dose*: In every respect as stated for *Nux-vomica*.

MERCURIUS may frequently be employed with great advantage after *Belladonna*, and is more particularly required when indicated by the following symptoms and conditions: Dryness, and burning heat of the lips; drowsiness in the daytime, but sleeplessness at night; severe and *painful sensitiveness of the belly* and of the region of the stomach, to touch or to pressure, these symptoms being aggravated, or developed *at night*, the *tongue* covered with white or yellowish coating,—or moist;—foul, or even offensive and *loathsome*, or bitter taste in the mouth; nausea or inclination to vomit, or, at other times, actual vomiting of *mingled phlegm and bilious matters*; the fever-symptoms are characterized by *general coldness*, shivering and shuddering *all over the body*, *irregular*, or quick and intermittent pulse; heat of the head and face, with flushing, when all other parts of the body are affected with coldness, shivering, etc.; giddiness when the head is raised; intense headache, with desire to press the head between the hands; intense dejection, and listlessness.

*Dose*: Of a solution of six globules, to two tablepoonsful of water, give a teaspoonful every four hours, until amelioration or change.

IPEACACUANHA is indicated by inclination to vomit, with utter repugnance to food; dryness of the mouth; the tongue either clean, or covered with a *thick*, yellowish coating; violent *retching*, without discharge, and attended with great straining, or *easy, copious* vomiting of slimy matters or of food, with a *violent gush*; looseness of the bowels, with discharge of yellowish and very offensive or even *putrid* evacuations; and accompanied with severe colicky pains; weight and sensation of fullness, with *very severe pains* in the region of the stomach; pale, yellowish hue of the skin; severe headache.



*Dose:* Of a solution of ten pills to two tablespoonsful of water, give (if violent vomiting occur), one teaspoonful every hour, until the symptoms yield.

CHINA is applicable to such cases as evince the following symptoms:—frequent eructations; vomiting or regurgitation of food; loss of appetite, and a sensation of thorough repugnance to all food, or as if one had eaten enough, or *more than enough*; frequent emission of very offensive wind from the bowels; evacuations containing *indigested food*; painful sensation of tightness in the belly, and of weight in the region of the navel; sensations of chilliness and shuddering after *drinking*; looseness of the bowels, with watery, *slimy* or *yellowish* evacuation; heat with full and quick *pulse*; headache (sometimes delirium), *burning* sensation in the *lips*, *red face*, and dry mouth.

*Dose:* Of a solution of ten pills to two tablespoonsful of water, give a teaspoonful every two hours, until amelioration or change.

ARSENICUM, an invaluable remedy in the majority of very severe and urgent cases, either when one or more of the preceding have failed to arrest the symptoms, or when the disease has run on to an advanced stage before treatment has been resorted to. The chief indications for it are: dryness of the tongue, accompanied with severe thirst, and with continual inclination to drink, with, however, inability to drink more than a small quantity at a time; bitter, or very acrid, *pungent* eructations; *saltish* or bitter taste in the mouth; nausea, vomiting of food or of greenish, *brownish*, or bilious matters; *extreme* tenderness of the region of the stomach to contact; *burning* and cutting, cramp-like, or spasmodic pains in the stomach and bowels, accompanied with chilliness and anguish,—or very painful sensation of weight and burning at *one spot* in the stomach; suspension of evacuations, *excessive* and *continued* relaxation of the bowels, attended with *severe* urging, and with *brownish*, yellowish or greenish evacuations; *scalding* sensation in passing water; the evacuations (or vomiting) are provoked by, or occur after, every movement, or *after drinking*, general heat of the body usually occurring at night, and accompanied with restlessness, anxiety, etc.; *irregular*, frequent, and quick pulse; extreme prostration of strength, and desire to assume or to retain a recumbent posture.

*Dose:* As for Nux.

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## ENTERITIS.

### INFLAMMATION OF THE BOWELS.

We apply this name to an inflammation of the intestines.

THE CAUSES of enteritis are mostly the same as those of indigestion, dietetic transgressions; the use of irritating, readily decomposed, sour substances; overloading the stomach; abuse of spirits; a cold. In addition, we have poisonous substances; mechanical irritation by fecal matter, the progression of which in the bowels is arrested, in consequence of which the vessels become compressed, or finally, though rarely, the inflammation may be caused by worms. Besides these causes, enteritis

occurs as a continuation of other inflammatory processes, gastritis, peritonitis, and as a form of reaction against ulcerations of the intestinal mucous membrane.

**SYMPTOMS.**—If at first the inflammation is not spread over a large surface, and confined to the lining membrane, the symptoms are not very grave. There are few local pains, little fever, loss of appetite, constipation, feeling of fullness in the umbilical region; nausea occurs very seldom; there is never any vomiting. In this manner the affection may exist for a short time and disappear again almost imperceptibly, or it may increase and continue to spread; very rarely the disorder breaks out at once in all its violence. The pains now become intense, burning or tearing, or cutting like colic, until they sometimes grow intolerable; they spread over the whole abdomen; are generally most violent in the umbilical region, where the least pressure causes an intense aggravation of the pain, which is increased even by the act of breathing; coughing causes extreme pain, which is likewise intensely aggravated every time the patient attempts to turn the upper part of his body, on which account he remains lying motionless on his back. At all times the pain has more or less prolonged aggravations like colic, evidently caused by the progressive descension of the contents of the bowels. At the same time the abdomen is distended, but not to excess. Where the small intestine is alone affected, there is obstinate constipation; where the large intestine is involved in the inflammation, we have sometimes, not always, diarrhœa, colored, frequently bloody stools, or alternate constipation and diarrhœa, or, finally, obstinate constipation. In such cases, the colicky pains are more frequent and extensive, the distention of the abdomen more considerable. In violent attacks of this disease the constitutional symptoms are always very marked. A general chill only precedes a very sudden invasion of the disease. The patient feels the heat more perceptibly than others; he is constantly complaining of an intolerable thirst; the pulse is accelerated, even to one hundred and twenty beats, small and contracted, not seldom unequal and intermittent; the skin of the body is hot and dry; the extremities are frequently cool; the forehead is covered with a perspiration as if from anguish; the appetite is entirely gone; the tongue has at times a light coating, at times it is clean and very soon becomes dry. If the affection increases in violence, the first symptom generally is nausea, which soon becomes associated with retching and vomiting. At first, bile and mucus are vomited up with the food; but if the inflammation is extensive, even fecal matter may be thrown up; the vomited matter very soon acquires a smell like that of fæces. The signs of collapse now become more apparent; the face has a cadaverous appearance, expressive of deep suffering, with elongated features and sunken eyes. Under such circumstances, the patient often wanders, the skin becomes cool, and is covered with a cool perspiration. Convulsions and fainting fits occasionally complicate these symptoms, and death may ensue under such circumstances. A rapid and complete recovery only takes place exceptionally.

**THE PROGNOSIS** is always uncertain, because the disease is apt to pass into insidious chronic complaints, even after recovery seemed to be fairly

under way; at all events, enteritis always constitutes one of the more important diseases.

The diagnosis of enteritis, although somewhat difficult, yet, with proper care, can be made in the majority of cases with positive certainty. The disorder is most easily confounded with incarceration, simple cholera, colic. The last two can become dangerous, if the trouble is esteemed too highly. Since it is not always possible to make a sure diagnosis until the disease has run along for a time, the employment of irritating remedies cannot be sufficiently guarded against in cases of colic and cholera.

### ALLOPATHIC TREATMENT.

**ENTERITIS.** The discrimination of acute enteritis (inflammation of the small intestines), will be very unsatisfactory, if made by unprofessional hands. If the diagnosis is made out, the treatment will be, essentially, as follows:

The patient should remain in bed. Hot fomentations should be persistently applied to the abdomen, and some form of Opium given to the extent of relieving the pain and checking the diarrhœa. Opium in doses of a grain, two to four hours, or longer, apart; but sufficiently often to procure relief from pain. Hyoscyamus or Belladonna may be advantageously given with the Opium, rendering the action of the Opium more pleasant. The dose of Extract of Hyoscyamus is one grain, of the Tincture one or two teaspoonsful. The dose of extract of Belladonna is a quarter of a grain, and a dose of the Tincture is ten drops.

Laudanum in doses of twenty drops, or Morphine in doses of a quarter of a grain, may be used instead of Opium.

It is as well to administer the Opium by injection into the rectum. For this purpose a teaspoonful of Laudanum should be used, mixed with one or two tablespoonsful of thin starch or milk. An eight-ounce hard-rubber syringe is a suitable instrument for this purpose. After drawing the mixture into the syringe, the nozzle should be elevated and the air can be expelled by slowly pressing the piston. After the injection, firm pressure on the anus (opening of the bowel) with a towel under the hand, for a time, will enable the patient to retain the injection. Both these methods of giving the medicine may be alternated.

It is not best to give cathartics, unless there is good reason to believe irritating substances are contained within the intestinal canal, and then it is better to resort to injections of warm water, if the bowels require moving.

The diet should be of a character which will not require intestinal digestion, nor cause irritation by their presence in the intestine. Beef-tea, beef-juice, raw eggs, and milk, answer this purpose as well as anything of which we have command. Rice and barley-water, or arrow-root boiled in water, may be drank.

It is common to recommend Cod Liver Oil and Iron. They are well-suited to these cases. I believe tablespoonful doses of pure Glycerine, having dissolved in it three to five grains of the Citrate of Iron, or the Citrate of Iron and Quinine, answer the purpose better.

The patient will require systematic feeding, if the disease be pro-

longed, to support the powers of life, as in fevers, full directions for this will be given on the subject of typhoid fever.

During convalescence, the usual diet should be returned to very cautiously.

When the disease affects children, it is necessary to be very cautious in the use of Opium. The Camphorated Tincture of Opium should be used, with an equal quantity of Tincture of Hyoscyamus. The usual dose of each being fifteen or twenty drops for a child one year old. For a child of five years, three grains of Dover's Powder, equal to one-third of a grain of Opium, may be used.

If the stools become charged with mucus, a teaspoonful or two of Castor Oil, with an equal quantity of Glycerine, flavored with one or two drops of Oil of Cinnamon, may be given. Rochelle Salts is, also, an appropriate laxative, in doses of half a teaspoonful (in lemon syrup). Laxatives should, however, be given with caution.

The diarrhœa which follows often, upon the subsidence of the inflammation, may be checked by appropriate doses of Paregoric, Dover's Powder or Opium, with ten-grain doses of Sub-Nitrate of Bismuth, or Tincture of Catechu, or Kino, in equal quantity with the Paregoric, in Chalk Mixture.

Local, and other general treatment, will be the same as for adults.

#### HOMEOPATHIC TREATMENT.

ACONITE in the early stages, when the inflammation is just beginning, will cut the disease short. Dry, hot skin; full, frequent pulse; mouth and tongue dry, with intense thirst. *Abdomen* swollen and *tender* to the touch; cutting, burning and tearing pains in the region of the navel. Great fear and anxiety of mind, with nervous excitability; bright-red and hot urine, are the leading symptoms calling for this remedy.

*Dose:* Eight pills every one to three hours, dissolved in a little water, or dry on the tongue.

MERCURIUS. Abdomen swollen hard, and painful to contact. Cutting, stabbing pains in the bowels, *accompanied* with chilliness and shuddering; green or bloody mucus stools, with violent griping; profuse perspiration affording no relief; pale, wretched complexion; foul smell from the mouth; vomiting of bitter mucus; *restless sleep*.

*Dose:* A powder or six pills every two to four hours.

BELLADONNA. Great *heat* and *tenderness* of the abdomen. Violent contraction or clutching pains in the bowels. Pains which appear suddenly and disappear just as suddenly after continuing for a longer or shorter period. Congestion of blood to the head, with throbbing of the arteries of the neck (carotids). Face flushed, eyes red and sparkling. Great intolerance to noise and light. Starting and jumping during sleep. Sleepiness, but cannot sleep. Partial or general spasms. Almost constant groaning or moaning.

*Dose:* As for Aconite.

ARSENICUM. Even if the previous treatment fails, there is still hope that this remedy will succeed, if the following symptoms are present:—Very rapid and weak pulse. *Sudden* failure or sinking of *strength*. Cold



clammy sweat, and great *restlessness*. Intense thirst, drinking often but little at a time. *Burning* in the abdomen, worse after *eating* or *drinking*, usually followed by vomiting. Symptoms all worse after midnight.

*Dose*: As for Mercurius. *Arsenicum* always gives the best satisfaction in potencies as high as 30 or upward.

*Bryonia* and *Cantharis* are also good sometimes. See "REPERTORY." Make *hot* applications to the abdomen. Bathe with tepid or cold water. Drink Elm Bark water, etc.

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## CATARRHAL DYSENTERIA.

### FLUX.

**SYMPTOMS.** The disease sets in without any definite precursory symptoms, or suddenly with violent pinching, cutting pains, radiating from the umbilical region downwards, and which are speedily succeeded by a violent urging to stool, with discharge of fecal, soft or watery masses. After the evacuation, the pains abate for a shorter or longer period, after which they return with renewed violence, and more particularly with increased urging, attended with tenesmus, (pain and difficulty with frequent desire) and severe pressing pain, during which a small quantity of white, and subsequently blood-stained, mucus is discharged, without any admixture of fecal matter in most cases. At the same time the patients experience an acute burning pain in the anus, and with every new discharge the tenesmus increases. In slighter cases the disease sometimes runs its course without any fever; the more acute cases may be attended with violent fever; the stomach is at times involved in the affection, at times not at all; there is loss of appetite, retching, nausea, vomiting; the tongue is usually quite clean. The duration of the disease usually depends upon its extent, which is pretty accurately measured by the extent of the pain. The slighter cases sometimes do not last more than a day, the severe cases last weeks, and then are disposed to pass into the chronic form. In the case of children the non-admixture of fecal matter in the stools is an exception to the rule; blood, pus, and scrapings of intestinal membrane, shreds of mucus membrane, and false membrane, are met with the more frequently, of a mixed green color. The dysentery of children assumes more easily a chronic form than in the case of adults, and almost always leaves a peculiar disposition to relapses. The so-called teething dysentery is just such a catarrhal affection, and arises less frequently in consequence of the process of dentition than of other influences acting upon the little patient, especially an erroneous system of preparing and administering nourishment. In the case of children, even if there is no sign of fever, convulsive symptoms are apt to follow, imparting a higher degree of importance to the otherwise not very important disease.

A fatal termination of catarrhal dysentery, in a person of an otherwise good constitution, is a rare occurrence. Even where the disease sets in as a complication of other diseases, the danger incident to its course is only of moderate importance.

The treatment will be shown when we come to speak of dysentery proper.

#### DYSENTERIA EPIDEMICA, DYSENTERY PROPER—FLUX.

However trifling catarrhal dysentery may seem, dysentery proper is an important and dangerous disease.

**HISTORY.**—Dysentery usually breaks out in an epidemic form; the few cases of sporadic dysentery that come to us for treatment, are either not dysentery, properly speaking, or else they are very rare occurrences. Dysentery is more particularly a disease of young persons and those of middle age, and very seldom attacks either the very young or very old. Epidemic dysentery almost always breaks out late in the summer, or in the beginning of fall, in very hot and dry seasons; it seldom lasts until winter is somewhat advanced; it seems to occur more frequently among the lower than the higher classes; its spread is promoted by the living in crowded rooms; nothing shows this clearer than the devastations which dysentery causes in the ranks of armies. Neither city nor country people are spared; it even seems as though the latter were more fearfully visited by this plague. If a disposition to dysentery prevails, errors in diet and catarrhal exposures excite the attack; the statement, however, that the use of fruit favors the breaking out of dysentery, is not yet proven. This assertion, at most, only applies to unripe fruit, or to such kinds as are apt to cause cholera morbus, diarrhœa, etc., such as the early cherries, plums, etc. There are, undoubtedly, individuals whose bowels are irritated by the use of any kind of fruit, and in whom it may cause an attack of dysentery.

These detached and well established historical data, cannot well be harmonized in one series, except by the supposition that there exists a peculiar virus, which has a special relation to the colon and rectum; for it is only in these parts that the phenomena of dysentery become localized. In this respect, dysentery is very near to Asiatic cholera, and likewise to other infectious epidemics. What the quality of the dysenteric virus, is has not yet been decided with any degree of certainty. That the virus is of a vegetable nature might be accepted as true, where dysentery spreads over extensive districts; but this theory does not apply where dysentery attacks whole armies. A discussion of this point is not as useless as it might seem, since its proper solution is intimately connected with the preventive treatment of dysentery. This question may perhaps be better elucidated by subsequent epidemics. It is certain that the virus is engendered in the patient, and is transmitted by him like the poison of cholera. Contagion does not take place by contact, but the infection is propagated by water-closets, close-stools, etc. This theory, which is now received as explanatory of the spread of cholera, explains the fact, why the disease decreases and disappears with the appearance of frost; the cold destroys the poison. This may be the reason also why dysentery sometimes continues as long as mid-winter, provided the warm weather lasts, and there is no frost. The circumstance that during an epidemic all the inhabitants of one house, but not all the houses in the neighborhood, are attacked, and that epidemics spread more extensively, and more frequently in the country where the exhalations from excrementitious matter are more freely

diffused through the air, speaks likewise in favor of the theory, that infection is communicated in the manner above described. Among armies in the field, the epidemic is propagated in a like manner, whereas the soldiers lying in the barracks are protected much more efficaciously, and the cases of dysentery occurring among them are less numerous. Even if the views which we have here expressed, are not absolutely accepted as true, yet no reasonable physician will neglect to arrest the spread of the disease, by effecting the removal of the various circumstances, which we have pointed out as exciting causes of the epidemic. Another important question regarding the history of dysentery is, whether an alteration in the functions of the liver does not constitute the chief exciting cause of the disease. The origin of the epidemic, at a time when the action of the liver is known to be altered, and the affections of the liver which so often prevail, during and after epidemic dysentery, seem to confirm this opinion. Hence, individuals in whom unhealthy changes in the functions of the liver, have developed a disposition to be attacked with dysentery, are most likely to be assailed by this plague; this circumstance again shows why middle-aged persons should be most liable.

Where the ulcers are not too extensive, they heal without much cicatrization. If the loss of mucous lining is considerable, contracting cicatrizes are the result, so that the bowel looks as if twisted around by cords, or presenting valve-shaped contractions. It is upon the duration of this process that the length of the period of convalescence depends.

**SYMPTOMS.**—The breaking out of the disease is almost always preceded by precursory symptoms. The patient feels languid, prostrate, and out of humor; the appetite is, more or less, wanting; there is oppression of the stomach, deranged digestion, and an increased accumulation of flatulence. These symptoms soon increase to nausea and desire to vomit, with coated tongue and foul taste; sleep is disturbed; there is drawing in the extremities, sensitiveness to external cold, shiverings, and an accelerated pulse. These symptoms show that the disease has invaded the organism. Above all, it is the diarrhœa which denotes the local sphere of the disease. Even if all the other precursory symptoms are wanting, diarrhœa generally precedes the attack, in company with slight colicky pains, and without any further characteristic peculiarities. As these pains increase, the diarrhœic discharges occur more frequently, but are, at the same time more scanty, in the same proportion the tenesmus, which precedes every discharge, begins to distress the patient. At times, after a few fecal evacuations, and at others after a somewhat longer duration of the simple diarrhœa, fecal matter ceases to be discharged; this is the commencement of the real disease. The colicky pains, which are seldom wanting, increase in intensity, become more continuous, and are attended with a painful urging to stool; a sensation as if the bowels would press out of the abdomen, or as though a heavy weight were suspended from the anus, or as if the sphincter ani (muscle that closes the anus, "puckering string") would tear. When these pains reach their height, there occurs a scanty discharge, attended with an intense burning at the anus. At first a remission of the distress takes place after this discharge, but the more frequently it occurs, the

more the tensmus increases in violence, and the less it intermits after the evacuation has taken place. The evacuated substance, which, for some time, continues to show a little tinge, soon becomes a mere mucus, with a grayish admixture, or a more or less copious admixture of blood (red and white dysentery), and of a peculiar insipid odor. In more violent cases, pure blood is evacuated. According as the disease is more or less intense the discharges occur every hour, sometimes every few minutes, so that the patient scarcely dares leave the chamber, however difficult it may be for him, owing to the continued violent and colicky pains, to sit up. The pains now become more tearing, cutting, radiating from the umbilicus (navel) downwards. The constitutional equilibrium is not much disturbed at the outset. In mild cases, the fever is scarcely perceptible, but there are frequent chilly creepings. The pulse is but a little accelerated, the temperature of the skin is not much increased. In proportion as the discharges increase in frequency, the pulse becomes correspondingly accelerated, hard and small, the skin hot and dry, the thirst distressing; the desire to vomit increases to real vomiting, although not regularly; the appetite is entirely gone. The patient soon loses his strength, and feels unable to sit up. The affection may continue, at this stage, for a week, after which it may gradually terminate in recovery. If the local changes are more considerable, the disease increases in intensity. The pulse grows frequent, small, and feeble, the thirst becomes agonizing, the temperature unequal, the extremities feel cool to the touch, the tongue can hardly be kept moist, the face has a cadaverous expression, and the prostration is complete. Usually the abdomen is much distended and sensitive. The discharges follow each other more rapidly, and the tenesmus continues uninterruptedly. The discharges, together with the blood, contain shreds of mucous membrane, and a number of membranous fragments. When the disease reaches this high, delirium is not an unusual occurrence. If the disease approaches a fatal termination, the discharges either become fetid, or else they cease entirely, or take place involuntarily, as a sign that the bowel is paralyzed. It is always a bad symptom, if the discharges diminish in frequency without any corresponding improvement. Death supervenes amid symptoms of general prostration, meteorism (distention with gas) delirium, coma. The termination in recovery may be considered certain, if a general improvement is accompanied by a decreasing frequency of the stools, and the colic abates, although the tenesmus still continues.

As soon as the discharges contain fæces, and the fecal odor is restored, recovery may be considered under full headway. The pulse generally continues somewhat more rapid, yet becomes fuller and stronger, and the symptoms of fever disappear. After a severe attack of dysentery, recovery scarcely ever takes place very rapidly; which, as we said before, is owing to the slowness with which the ulcerated surfaces heal; it may, also, be owing to the fact, that the condition of the digestive organs does not admit of a rapid reparation of the waste, by a copious supply of food.

In armies, especially, the transition of acute into chronic dysentery is not a rare occurrence. The symptoms of chronic dysentery correspond with those of ulceration of the bowels, which indeed constitutes the basis of the chronic form. In such a case the fever disappears entirely, but



the diarrhœa continues, consisting at one time of fecal masses, lined with pus and blood, and at other times of a sanguineo-purulent mucus, or changing about with obstinate constipation. At the same time the appetite does not return, and the patients continue to lose flesh. Death is apt to terminate such sufferings, though, frequently, not until they have lasted a long time.

The severest forms of dysentery, the septic, putrid or typhoid form, are of very rare occurrence in our latitude; they are more frequently met with in hot climates. Such forms arise either because the milder form assumes a malignant type, with all the signs of gangrenous destruction of the bowel, or else they break out at once with an extraordinary degree of intensity, characterized by the signs of a most acute typhus, and rapidly terminating in death.

Strictly speaking, there is no transition into other affections; the abscesses of the liver, which do not occur unfrequently, even among us, after a violent attack of dysentery, are most probably due to the absorption of pus into the vessels; or possibly to a disease of the liver, running its course simultaneously with dysentery.

THE PROGNOSIS, in the dysenteries of our climate, is emphatically favorable.

#### ALLOPATHIC TREATMENT.

Treatment of Acute Sporadic Dysentery or Flux (occurring independently of epidemic influences.) In this disease nature points unerringly toward a thorough emptying of the intestinal canal of its contents. This shows by the copious diarrhœa which precedes the dysentery.

The first object of treatment, therefore, is to effect this object as quickly and thoroughly as possible, assisting nature's efforts by an efficient cathartic. By far the most effective cathartic for this purpose is Sulphate of Magnesia (Epsom Salts.) Take a sufficient quantity of Sulphate of Magnesia to saturate seven ounces of water; add one ounce of Aromatic Sulphuric Acid. The dose of this mixture is a tablespoonful every hour or two until it operates freely; or the Epsom Salts may be given in doses of a heaping tablespoonful steeped with one-third of its bulk of roasted coffee and repeated in four hours, if a free watery stool has not been before produced. Rochelle Salts in doses of a tablespoonful in solution with water and lemon juice or Citrate of Magnesia, may be employed, but the acid solution of Epsom Salts is to be preferred. Castor Oil is only of less value as a purge in this disease than the cathartics before mentioned. If used it should be given in doses of a tablespoonful or more, mixed with an equal quantity of Glycerine and flavored with a couple of drops of Oil of Cinnamon. This should also be repeated in four hours, if it has not operated. After thorough purgation has been produced the cathartic is to be discontinued.

This effect is followed by a period of rest and sometimes recovery immediately takes place. This rest of nature should be aided and prolonged by a full dose of Opium. The Opium benefits also by its direct effect on the inflammation (called antiphlogestic) as well as aiding recovery by prolonging the quiet of the intestine. It is preferable to give the Opium by injection into the rectum. For this purpose a teaspoonful to a tea-

spoonful and a half of Laudanum should be mixed with one or two tablespoonsful of thin starch or milk, and injected into the rectum with a hard rubber syringe. If it is thrown off it should be immediately repeated and caused to be retained by firm pressure upon the anus (opening of the bowel) with a towel under the hand until the efforts to expel it cease. Generally speaking, once in twelve hours is often enough to repeat the injection of Laudanum, but it should be often enough to afford complete relief, and the dose increased until this effect is produced. Suppositories of Opium or Morphine can be purchased which will answer the purpose. In some instances neither the injections nor suppositories can be retained in the rectum. In such cases it must be given by the mouth. Then the powder or pills of Laudanum or Morphine may be used. The usual dose is one grain of the powder or one pill, or twenty-five drops of Laudanum, or a quarter of a grain of Morphine, but the dose must be increased until relief follows its administration, and repeated often enough to continue the relief.

The patient should be quiet in bed, a large flax-seed poultice containing two or three tablespoonsful of mustard placed over the stomach. About half an hour after the Opium or the Laudanum injection is given, thirty grains of Ipecacuanha scraped in a medicine wafer, should be given, or it may be given in milk. The Ipecacuanha causes the stools to become natural, the griping and straining cease, the hot, dry, skin becomes moist and the patient becomes refreshingly calm. In a simple acute case this may complete the cure. The Ipecacuanha may be repeated in from six to eight hours, if required, and will be taken if a disgusting sickness at the stomach is not caused. With every dose the hot poultice or a mustard plaster should be placed over the stomach. If a dose is vomited it should be immediately repeated.

Some patients find it impossible to continue the use of the remedy. In such instances, its use must be dispensed with. The treatment, then, will rest upon free cathartics and Opium.

Whenever stools, with mucus or slime and blood, begin to pass the cathartic should be at once resorted to, as in the first place, to be followed as before, with the Opium and the Ipecacuanha, if it is tolerated. It is well to state here, that the treatment of dysentery with Ipecacuanha has reduced the fatality in acute dysentery to one-third of the mortality previous to its introduction, as shown by reports from the East Indies.

Persons who cannot take Opium and Morphine, can usually take the Watery Solution, or the Alkaloid of Opium, called Codia, in doses of a grain. The benefit from Opium is so great that it is best for patients to suffer some inconvenience from the Opium. Its unpleasant effects may sometimes be obviated by giving with it a full dose of Hyoseyamus or Belladonna—one or two grains of the Extract of Hyoseyamus, or one-fourth of a grain of Extract of Belladonna.

Remedies which may sometimes be associated with the internal use of Opium, in this disease, are: Bismuth in doses of twenty to thirty grains (half a teaspoonful). Acetate of Lead (Sugar of Lead) in doses of three to five grains. Sulphate of Copper in doses of a twelfth to a fourth of a grain. Tannin in doses of ten to twenty grains, and the various vegetable astringents, among which are: Rhatany, Kino, Catechu, Log-

wood, White Oak Bark, Witch Hazel, White Pond Lilly Root, etc. Very seldom will it be necessary to resort to any of them, if the foregoing directions, regarding the use of Cathartics, Opium and Ipecacuanha, are strictly followed.

When the disease is prolonged, and the stools become of a bloody, watery character, these astringents occupy quite an important place in the treatment. Ipecacuanha should be given, if tolerated, together with Opium, in some of its forms, to the extent of relieving pain, some of the foregoing astringents, which may be tried in succession, and tonics. Then cathartics, as a rule, should not be given.

Particular attention should be given to the diet, and nothing of a coarse character, which will make stools, should be allowed, but the food should be rich in nourishment. Milk, meat-essences and broths, raw eggs beaten up with a little sugar and milk, or water, answer this purpose the best.

Moderate quantities of arrow-root, sago, tapioca, and rice, may be given. The patient may drink, at will, of thin mucilage of slippery elm, or Gum Arabic, or flaxseed tea, barley or rice-water.

One of the best forms of tonic for prostrated cases, and when recovery is slow, is: Elixir or Syrup of Quinine, or Cinchonidia, Strychnine and Iron. The dose is, usually, a teaspoonful three times a day, though a dessertspoonful may be given. Whatever the form of tonic given, the dose of Quinine is one or two grains, Iron one grain, and of Strychnine not to exceed a thirtieth of a grain.

In severe epidemics of dysentery, the treatment does not materially differ from the above, except, perhaps, in the quantities of medicines required to control the disease. The principles of treatment are the same. Cathartics are to be given more cautiously, and are to be omitted altogether, if the discharges become watery instead of mucus, or if the patient be notably prostrated.

The rules for giving Opium and Ipecacuanha are to be observed. Much larger doses of Opium may be required to procure relief from the pain and griping, and to arrest the frequency of the discharges from the bowels. It should be given frequently enough, and in increasing quantities, until that result is reached. After a dose of Ipecacuanha has been retained, as a rule, less Opium will be required. While the Ipecacuanha should be repeated as before directed, no intermission must be permitted in giving the Opium, and should always be carried to the extent of checking the watery-bloody discharges in increased doses till this effect is produced.

In increasing the doses in this way, the patient must be carefully watched that Opium poisoning (narcotism) is not produced. Contraction of the pupils ("sight of the eye" decreasing), frequency of breathing and profound sleep, indicate this condition. If, however, the patient breathes twelve times in a minute, the danger from narcotism is not great.

In cases of great danger from exhaustion and prostration, stimulants are to be given with the nourishment. For this purpose, I believe Brandy to be the best. It should be given to a point short of excitement of the circulation, or nervous system. Its beneficial effect will be shown by a general calm, and the pulse will become softer, fuller, more regular, and

slower, and the tongue moistens. The dose should be begun at a table-spoonful for an adult, repeated at intervals of four hours, preferably with food, and may if necessary be increased in frequency and quantity to meet the requirements of the case. It does harm, if the frequency of the pulse is increased and the tongue becomes dry.

Symptoms of malarial trouble will call for Quinine, the same as is directed in (bilious) remittent fever.

In all cases of dysentery, patients should refrain as much as possible from efforts to stool, for the sensation is delusory, depending on the inflamed state of the bowel. Cold to the anus, as ice wrapped in a cloth, is useful. The Opium injections relieve this painful sensation the best of anything. Five grains of Sugar of Lead may be added to the injection with benefit, though for this combination a half a grain of the Acetate of Morphine, dissolved in a teaspoonful of Glycerine, is better than the Laudanum.

Tannin, in quantities of a scruple, may be used in this way, instead of Sugar of Lead.

In cases which, after thorough trial, cannot take Opium in any form, I would recommend an injection of one of the astringents named, dissolved in a tablespoonful of Glycerine, with fifteen drops of the Fluid Extract of Belladonna or a teaspoonful of the Tincture. A teaspoonful or two of Fluid Extract of Hyoseyamus, or two or three grains of the Solid Extract, may be rubbed up with Glycerine, and used instead of the Belladonna.

In case none of these are procurable, a strong tea made with Jimson Weed, Stramonium, may be used with benefit.

During convalescence, the amount of doses and frequency of giving them, should be gradually diminished. Tonics, as recommended in simple acute dysentery, are applicable here.

So dangerous a disease as epidemic dysentery, requiring such positive treatment, ought to be under the direction of a competent physician.

#### HOMŒOPATHIC TREATMENT.

According to our remarks on the causes of dysentery, it is evident that there must be a preventive treatment of dysentery, and that it must result in great good. From what we have said on the subject, the single points of this prophylactic treatment can easily be inferred. In this place we desire to call attention to the absolute necessity of keeping the evacuations of dysenteric patients separate. It is, moreover, of the utmost importance to treat every diarrhœa that may occur during epidemic dysentery, with great care, and to arrest it as soon as possible, since it is an established fact, that a diarrhœa produces an increased sensitiveness to the dysenteric virus.

MERCURIUS occupies the first rank among the remedies for dysentery, and among the mercurial preparations it is the *Corrosive Sublimate* (*Merc. Corr.*) This remedy corresponds to the symptoms of ordinary dysentery so perfectly, that it may safely be regarded as a specific remedy for the whole process. The leading symptoms of dysentery, the bloody mucus evacuations without any fecal matter, attended with the most violent tenesmus and cutting colic, is a characteristic and constant



symptom of *Merc. Corr.* All physicians agree that the lower attenuations of this remedy are preferable, and that it should not be given higher than the sixth; they likewise agree, that the dose should be frequently repeated. The best plan is to give a dose of the remedy after every discharge; as the discharges diminish in frequency, the medicine will likewise have to be repeated less frequently. The effect of the remedy is perceived very soon, in most cases within thirty-six hours. Of course we cannot expect to perceive a striking improvement in twenty-four hours; nor would it be advisable to select another medicine, if no improvement takes place in that space of time.

The *Merc. Corr.* almost always deserves a preference in epidemic dysentery; Mercurius sol. is preferable in the so-called white dysentery. In epidemic dysentery, the so-called white dysentery is of rare occurrence, and then only a very transitory condition. On the contrary, catarrhal dysentery, is, in every respect, adapted to Mercurius sol., and it is only in exceptional cases that this remedy will prove unavailing. As long as the evacuations contain feces, although in small quantity, it is well to give the solubilis the preference, no matter whether blood is discharged with the stools or not. On this account, this remedy is especially appropriate in the dysentery of children, especially during the period of dentition. The triturations of solubilis are preferable, whereas the Sublimata acts better in solution. The *Mercurius vivus* is preferred in this disease by many physicians.

Next to Mercurius *Belladonna* is, without doubt, the most important remedy in dysentery, both the catarrhal and epidemic. As far as local symptoms are concerned, *Belladonna* is indicated by the violent urging to stool, with or without scanty discharge; violent pains in the distended abdomen; they are aggravated by pressure or else evidently of an inflammatory character; liability of the rectum to protrude. Other prominent indications for *Belladonna* are: considerable urinary difficulties, even retention of urine; violent fever, also with delirium, severe gastric derangement, nausea, vomiting. *Belladonna* is most frequently suitable for children; less so for adults.

The catarrhal form of dysentery being exceedingly varied, a number of other remedies might be recommended for this disease. *CHAMOMILLA*, for instance, is a main remedy in the dysentery of teething children, if the local symptoms are accompanied by acute fever, restlessness, sleeplessness, constant cries, vomiting of bile, nightly aggravation of the symptoms, or the symptoms only show themselves during night-time. Another remedy is *Ipecacuanha*, when the tenesmus only sets in after the discharge, and there is frequent and distressing vomiting of bile, while the fever is not very considerable; *Dulcamara* and *Pulsatilla*, when the discharges consist of mere mucus; they mostly take place at night. *Baryta*, for the dysentery of children, when it threatens to become chronic, provided there are no striking symptoms of ulceration of the intestines. *Calcareo carbonica*, is adapted to the same form of dysentery as *Baryta*, likewise applicable to ulceration of the bowel, here it is even a chief remedy for children. A Dose of any of the preceding remedies should be given after each evacuation, provided they do not occur more frequently than every hour.

We have already stated, that the abovementioned remedies are sufficient in epidemic dysentery, unless it should pursue an entirely exceptional, abnormal course, or be complicated with various accessory symptoms. This statement likewise, only applies to cases that have been treated homoeopathically, from the commencement. But we are also called upon to treat dysentery in its more advanced stages, or after the system has been saturated with powerful medicines. For such abnormal forms of dysentery, the above-mentioned remedies are not sufficient, and one or more of the following list will have to be selected.

ARSENICUM ALBUM is never indicated at the commencement of dysentery, only when evident signs of putrid decomposition become apparent, together with paralysis of the bowels and anus, in a slight degree. The evacuations have no longer a peculiarly insipid smell, but are fetid, of a blackish-brown color, mixed with numerous shreds of mucous membrane. The pains are uniformly severe, the fever is intense, attended with signs of rapid prostration and great thirst.

RHUS TOXICODENDRON, Hartmann says: "It is particularly applicable in protracted cases, where the violence of the symptoms has been diminished by the previous treatment, but where all the symptoms that characterized the attack from the commencement, are still present; it is prominently indicated by excessive prostration, the blood is greatly deficient in plasticity, the organic activity threatens to become extinct; typhoid symptoms supervene." In other words, Rhus is suitable in typhoid dysentery. A noteworthy symptom is the circumstance that the evacuations appear at night; there are also involuntary discharges.

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#### COLIC—ENTERALGIA.

A disease which appears under a great variety of aspects, and which is associated with various derangements, either casual, or permanent and organic. It should therefore especially be considered with due regard to the general review of disorders affecting the stomach and intestines, as afforded in the article on "Indigestion."

Colic may be spasmodic, particularly as associated with hysterical complaints; or may be associated with local determination (congestion) of blood as occurring in conjunction with menstruation or piles; or again it may be developed as a transition of disease from other organs: as, for instance, when some previous disease has been suddenly suppressed; or again it may be associated with worms, or may appear as a manifestation of flatulency; or again, purely from foulness or surfeit of the stomach, or result from indigestible food; in other instances again, colic is associated with gravel, or other organic derangements of the kidneys, etc.; or it may be come developed in consequence of the suppression of chronic eruption on the skin, or again from excessive or acrid discharge of bile from the liver into the stomach and intestines.

**SYMPTOMS.** Gripping, tearing, gnawing, or shooting pain in the bowels, chiefly confined to the region of the navel, generally attended with a painful distention of the belly, with spasmodic contraction, and sometimes

accompanied with vomiting and costiveness, or looseness of the bowels. One of the characteristic distinctions between this disorder and inflammation of the bowels consists in the degree of alleviation to which the pain is subject upon pressure. The long continuance and intense severity of colic may however result in inflammation, for which reason it is ever advisable to arrest its progress in any severe cases.

**CAUSES.** The general exciting causes of this complaint are acid fruits and indigestible substances, cold from wet feet, drinking cold beverages when heated, constipation, worms, etc. It is frequently also a concomitant symptom of some other derangement, but occurs equally often as a primary disease.

This disease is so well understood, that we are justified in proceeding at once to the treatment, giving in its course various symptoms as developed by different causes.

#### ALLOPATHIC TREATMENT.

**COLIC.** In the treatment of colic, the first indication is to relieve pain, whatever may be the cause. This is done best by an injection of a teaspoonful of Laudanum with fifteen drops of Tincture of Belladonna. If there is flatulence, a couple of ounces of mixture of Assafœtida may be used with the Laudanum, as a vehicle. The injection should be made with a hard-rubber syringe.

If no flatulence exists, the injection of Laudanum, with or without the Tincture of Belladonna, may be given with a couple of tablespoonsful of Starch Water. The Assafœtida mixture (or Milk) is made by rubbing two drams of the gum in a pint of water.

A couple of teaspoonsful, or a tablespoonful, of the mixture (Milk) of Assafœtida given by injection, is an efficient remedy for the flatulent colic of infants. Three to five drops of Laudanum may be added if the first injection does not relieve.

A cathartic ought not to be given in colic until after the pain is relieved, and then, if no inconvenience is experienced, twenty-four hours or a couple of days may pass before one is given. In the mean time, the bowels will generally move spontaneously. If they do not move, a large injection of warm water may be given. If this prove ineffectual, three Compound Cathartic Pills should be taken.

If cathartics are given before relief from pain, the spasm of the intestine interferes with its action, and it aggravates the malady.

Much relief is obtained by hot applications over the abdomen. In mild cases, some hot aromatic tea, as Ginger, Anise, Cloves, or Mint, may give relief. In severe cases, recourse should be had at once to the injection of Laudanum, or to a dose of twenty-five drops, and a teaspoonful of Spirits of Camphor, by the mouth.

Morphine, in doses of a quarter of a grain, or an Opium and Camphor, may be given. If complete relief does not obtain in an hour, the dose should be repeated, either by injection or by the mouth.

Hysterical colic is almost always relieved by an injection of a pint of the Mixture of Assafœtida, but if this does not succeed, the same remedy may be given by the mouth, in doses of a tablespoonful—Opium Laudanum may be added, in extreme cases, as directed above.

The carminative teas, before mentioned, and hot applications, are useful. The treatment is given in considering the disease, Hysteria, to which the reader is referred, if anything additional is needed.

In rheumatic colic, immediate relief from pain is to be procured as before directed for "colic." The rheumatic trouble may generally be overcome by the continued use of Salyellie Acid in doses of ten to twenty grains, four times a day, given in capsules or medicine wafers. For further consideration of the rheumatic condition, the reader is referred to the article on Rheumatism.

The treatment of neuralgic colic is identical with that of neuralgia, to which, and to the treatment of neuralgia, the reader is referred.

In *Printers' and Painters' Colic* (Saturnine or Lead Colic) the treatment consists in the first place, in the relief of the extreme pain. This is accomplished precisely as is directed for simple colic. The use of opiates must be persisted in until relief is obtained. The obstinacy of the colic will require their continued administration at varying intervals of from one to six hours, for a much longer period than is required in simple colic.

Together with the use of Opium a liniment of one part each of Chloroform, Tincture of Aconite, Laudanum, and three parts Soap Liniment may be freely applied over the abdomen. Hot bathing is also useful.

As a means of relieving the pain of lead colic, used continuously with the use of Opium and hot bathing, Alum may be given by the mouth, in doses of fifteen grains every two hours. A good formula is this: Take of Alum two drams, Aromatic Sulphuric Acid one dram, Syrup of Lemon one ounce, Water three ounces. Mix.

*Dose:* A tablespoonful every two hours.

A teaspoonful and a half of Alum may be added to a pint of boiling milk, separate the acid acid of the whey (Alum whey.) The patient may take a wineglassful every hour or two.

After the pain is relieved the elimination of the lead from the system may be greatly hastened by free purgation with the saline cathartics. The best one for this purpose is the Sulphate of Magnesia (Epsom Salts.) Take an ounce of Epsom Salts, Aromatic Sulphuric Acid a dram, Water four ounces. Mix.

*Dose:* One-fourth part every three hours until free purgation takes place.

After first giving relief with Opium the bowels should be briskly moved every day during the treatment, by the use of Epsom Salts.

The Iodide of Potassium is one of the best remedies to facilitate the elimination of lead from the system. Take of a saturated solution of Iodide of Potassium fifteen drops, three times a day and gradually increase the dose until the characteristic effects of Iodide are produced. Vary the symptoms of an acute catarrh, with the presence of Iodine in the secretion from the nose.

A drink of one dram (teaspoonful) of Aromatic Acid to the pint of water sweetened as desired is protective against Lead poisoning. Thorough cleanliness, washing out the mouth and nose (with a douche), warm bathing each evening, and the occasional use of Epsom Salts as a purgative, should be practiced.



In *Colic from Copper*, the relief of pain as directed for lead colic, with the use of Sulphate of Magnesia for a purgation, are the principal points in treatment. Iodide of Potassium given as directed for lead colic, assists in throwing the poison off from the system. The same precautions as to cleanliness are required as against lead. Milk is said to be a preventive.

#### HOMOEOPATHIC TREATMENT.

*NUX-VOMICA* is a valuable remedy in colic, either associated with flatulency or piles, or in colic arising from a chill, and is particularly indicated when there is a sensation of *fullness and tightness* at the upper part of the waist; deep-seated or cutting pains in the belly, with *acute and hard, pressive, and forcing-down* sensations, compelling the sufferer to bend double; confused headache, with occasional loss of consciousness; flatulence, aggravation of the pains on the slightest motion, generally disappearing when at rest; *constipation*, coldness and numbness in the hands and feet during the paroxysm; at the monthly period in females, when we find weight, or violent, deep-seated, aching pain in the belly, dragging pains extending to the thigh; aching and creeping sensation in the same part when sitting; painful pressure towards the terminal bowel.

*Dose:* Of a solution of six globules to six teaspoonsful of water, give a teaspoonful every half hour (in very acute cases), or every hour when the pain is not continuous or insupportable, until distinct amelioration or change.

*PULSATILLA* is more useful in the affection occurring in females, either during the menstrual discharge or at other times, when coming on periodically in the evening during cold, damp weather; also when there are present a disagreeable *tightness and distention* of the belly and the upper part of the waist, pulsation in the pit of the stomach, *aggravation of the suffering when at rest or in the evening*, attended with *shivering*, which increases with the pains, and is mitigated by motion, when it has arisen from overloading the stomach, or from rich, greasy food, with inclination to vomit, *flatulence*, looseness of the bowels, paleness of the face, livid circle round the eyes, and headache; also hæmorrhoidal colic, with fullness of the veins of the hands and forehead, restlessness, anxiety, and sleeplessness.

*Dose:* A solution of six globules, or otherwise, in all respects as directed for *Nux-vomica*.

*CHAMOMILLA* is chiefly useful for bilious colic (with looseness of the bowels and bilious vomiting); or for colic in females during the menstrual discharge. The following are the principal indications; sensation as if the intestines were gathered into a ball, and as if the belly were empty, with *tearing and drawing* pains, attended with excessive anxiety and restlessness; *distention under the lower ribs, and in the pit of the stomach*; incarcerated flatulency, sometimes nausea, *bitter vomiting*, followed by desire to relieve the bowels, and *bilious diarrhœa*; livid circles round the eyes, alternate paleness and redness of the face; the pains come on particularly at night, at times early in the morning, or after a meal. This remedy, particularly adapted for children of irritable temperaments, and is extremely serviceable in all cases in which a fit of *passion* has been the exciting cause of the sufferings. It is also useful when colic has arisen from cold in the feet, or checked perspiration.

*Dose:* As for *Nux*.

**COLOCYNTH.**—In the majority of violent and obstinate cases, we find this a most valuable remedy; it is indicated when the pains are excessively violent, and of a *constrictive* or *spasmodic* character, or resemble stabbing and *cutting, as if from knives*; sometimes there is a sensation of clawing and pinching, and tenderness of the belly, with a pain as from a blow, or *distention*; at other times a sense of emptiness is experienced, with cramps and shivering, or tearing pains in the legs; during the continuance of the attack, we find excessive restlessness, agitation, and tossing about, from the violence of the pain; when the pains come on, they continue without any apparent intermission; after their disappearance, a sensation of bruising remains, and the sufferer feels as if the intestines were held together by thin threads, likely to break from the slightest motion. This remedy, like *Chamomilla*, is particularly efficacious in the so-called **BILIOUS COLIC**, being indicated by the loose discharge from the bowels, and bilious vomiting attending it; and also in cases where passion has been the exciting cause. *Colocynth* is more particularly useful in the case of adults.

*Dose:* As for *Nux*.

**BELLADONNA** is useful against flatulent colic, when there is *protrusion of the transverse section of the great intestine*, which becomes distended like a *pad* above the navel, attended with colic-like pain, doubling up of the body, which is relieved by pressure on the part; also severe bearing-down of the whole intestines; also in *menstrual colic*, with *spasmodic constriction* in the belly, and a burning pain lower down, or in the small of the back; pain in the lower part of the bowels, *as if a number of nails were holding the intestines*. The symptoms are also attended with a liquid or matter-like discharge from the bowels, and swelling of the veins of the head; and the pains are sometimes so violent as almost to deprive the patient of reason.

*Dose:* Of a solution of six globules to two table-spoonsful of water, give a teaspoonful every half hour (in very acute cases), or every hour (when the sufferings are not continuous or intolerable), until distinct amelioration or change.

**COCCULUS** is indicated (*especially in menstrual or flatulent colic*) when there are severe constrictive or spasmodic pains and distention of the entire stomach, with nausea and fullness of the *lower part of the belly*, great flatulence, and difficulty of breathing; also when there is a sensation of emptiness, and tearing and burning pains in the intestines, sometimes with squeezing, tearing and pulling pains, excessive anguish and nervous excitement; constipation.

*Dose:* As for *Bell*.

**ARSENICUM** is often appropriate in cases of colic (bilious), arising from disordered stomach, with nausea, vomiting, great relaxation of the bowels, with green or yellow evacuations, violent gripings, headache, paleness of the face, and blue marks round the eyes. Again, in cases of bilious colic, which is prone to be preceded, followed or alternated with sick headache, *Arsenicum* is of great service.

*Dose:* As for *Nux-vomica*.

COFFEA is valuable when we have to prescribe for colic with excessive pains, attended with great agitation, anxiety, and tossing about, grinding of the teeth, convulsions, suffocative attacks, oppressive despair, acidity, and coldness of the body and extremities. It is also useful in some kinds of menstrual colic, denoted by a sensation as if the belly were being rent asunder; or by fullness and pressure in the stomach, and violent spasms, which extend to the chest. It is also indicated by cutting pains in the intestines as if divided by a knife, and also by the pains present being so violent as almost to drive the patient to distraction, causing him to bend double, and draw up his limbs.

*Dose:* As for *Bell*.

IGNATIA is a most valuable remedy for colic, particularly as affecting female patients of delicate constitution, and is indicated by the following symptoms amongst others: Fullness, tightness and pressive sensation across the region which extends along the lower ribs; accumulation of wind in the bowels which is expelled with much difficulty, a relief, however, being obtained upon the expulsion of wind; stitching pains in the region of the spleen, etc.,—more especially however, if the colic occurs, or is worse *at night*.

*Dose:* Of a solution of eight globules to three tablespoonsful of water, give a teaspoonful every hour, (or in very mild cases, every three hours), until distinct amelioration or change.

IRIS-VERSICOLOR (*Blue Flag*). Involuntary escape of fluid of an offensive, putrid and coppery odor. In cholera morbus it arrests the violent pain.

MERCURIUS is a medicine of great value in cases of colic, characterized by the following assemblage of symptoms:—nausea with profuse flow of saliva; voracious appetite with repugnance to sweet things; frequent and troublesome hiccup; constant and painful urging to evacuate; severe pinching, drawing, nipping pains, with tightness and hardness of the belly particularly about the navel; or tensive, stinging, cutting, or *burning* pains; *aggravation* of these sufferings *at night*, and more particularly in the *latter part of the night*; extreme tenderness of the belly upon contact or pressure (the clothes or bed-clothes appear to cause pain); sometimes looseness of the bowels with *slimy* evacuations; considerable prostration of strength and chill (or even shuddering), accompanied with *flushing* of the cheeks. *Mercurius* is also a most important medicine in cases of colic associated with *worms*.

*Dose:* Of a solution of six globules to three tablespoonsful of water, give a teaspoonful every half hour until three doses have been given, and then every hour until distinct amelioration or change.

SECALE-CORNUTUM is indicated for *male* patients affected with colic attended with pain in the small of the back, eructations and vomiting, or dragging, tearing pain in the thighs:—or amongst *female* patients for colic occurring at the menstrual periods, when tearing pains in the bowels, paleness of the face, small, weak pulse, coldness of the extremities, and cold sweats are predominant symptoms; or when constipation with cramp-like pains in the bowels, and burning pains on the right side of the belly prevail.

*Dose:* Of a solution of eight globules to three tablespoonsful of water, give a teaspoonful every hour until the suffering abates, and then every three hours until distinct amelioration or change.

CARBO-VEG. occurs, in many cases of somewhat serious aspect, as a medicine of great importance, and is particularly indicated by the following symptoms:—violent pains in the bowels, provoked even by the lightest and most wholesome meal: sensation of heat in the head and in the bowels; determination of blood to the head, attended with heavy, aching pains; fullness and tightness of the belly so severe, as to convey the sensation that it would burst, and accompanied with flatulent risings, or accumulation of wind with difficulty and oppression of breathing, nipping pains and rumbling, and sluggish action of the bowels. *Carbo-veg.* may often be administered with striking success in cases of colic associated with *piles* or with *flatulency*.

*Dose:* As for *Bell*.

#### PREDISPOSITION TO COLIC.

SULPHUR is amongst the most valuable remedies in the generality of cases in which a constitutional predisposition to affections of this nature is evinced by the failure of other medicines to afford *permanent* relief. Wherefore, in particular, if *Nux-vomica*, or *Carbo-veg.*, or if both have been employed as above directed, in cases of colic associated with piles, but have failed in obviating the repeated recurrence of the attacks, the persevering administration of *Sulphur* becomes necessary. The same may also be said of bilious colic, in which *Chamomilla* or *Colocynth*, or both have been employed with similar results. The same remark is equally applicable to cases of flatulent colic, in which *Nux-vomica*, *Carbo-veg.*, *Chamomilla* or *Cocculus*, or two or more of these medicines, have been previously employed in like manner.

*Dose:* During the continuance of an acute attack, of a solution of six globules to two tablespoonsful of water, give a teaspoonful every hour until relief is obtained. Subsequently, however, give six globules in a wineglassful of water every morning the first thing (*fasting*), for ten days, (unless collateral symptoms should appear in the meanwhile)—after which, pause four days, and resume the course as before (if necessary), and so on until the symptoms are permanently subdued or undergo a distinct change.

#### WORM COLIC.

As this is in point of fact, a mere symptom dependent upon the presence of Worms in the intestinal canal, or upon the cases which promote the generation of these parasites, the subject will be more accurately considered in the article devoted especially to that subject,—to which therefore the reader is referred.

#### HOME MEASURES IN CASUAL ATTACKS.

In cases of colic, arising suddenly from indigestible food, a cup of black coffee, without milk or sugar, will frequently afford relief, by causing the stomach to free itself from the cause of annoyance:—that is, in patients who have not used that article as an ordinary beverage.

DIET AND REGIMEN. In this, as in all other complaints arising out of derangements affecting the functions or organs of digestion, the diet and



general habits, or the particular precautions in individual cases, should be regulated in conformity with the directions afforded under the head of "Indigestion." If particular food or drink, such as raw fruit, milk or *cold* things, be apt to provoke an attack of colic, the particular food or drink in question, in every particular case, should be carefully avoided.

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## CONSTIPATION WITH DETERMINATION OF BLOOD TO THE HEAD.

### ALLOPATHIC TREATMENT.

Constipation is to be treated, always, with reference to the producing cause. In temporary constipation, as that of pregnancy, and in recovery from acute disease, is to be met, chiefly, by attention to the diet; but, if this fail, recourse should be had to laxatives or, possibly, in the first place, to an active purge. If there is complete obstruction, the disease is too serious to be tampered with by any but the most skillful man.

In habitual constipation, there should be a regular effort at stool, at a regular time, whether the desire exists or not. The preferable time for this is soon after breakfast. As a preventive of constipation never should the natural desire to go to stool be voluntarily restrained.

The constipation should be remedied as far as possible without medicines, but by laxative food. Vegetable diet tends toward a looseness of the bowels, and animal food, by being almost wholly absorbed, to constipation. The articles of diet to be preferred for this end are, cracked wheat, Graham flour, Indian meal or hominy, and oat meal prepared according to the art of the kitchen, eaten with cream and sugar, or with butter and molasses.

Almost all kinds of fruit, taken quite freely, are advantageous in overcoming constipation. Molasses and brown sugar aid to make the bowels more lax. Milk is constipating, but only, I believe, because it is almost wholly absorbed.

None of these articles of diet are to be used if they disorder digestion or occasion other disturbance. Sometimes more harm is done by burdening the stomach and bowels with articles difficult of digestion, or loading the intestines with unbolted flour, than could be done by the constipation.

In the use of medicines, the patient should not, as a rule, be physiced, but the least active medicines which will accomplish the result, are to be used. If, however, constipation has for a long time been present, and the bowels filled with fecal accumulations, a cathartic which will thoroughly empty them is a necessity. For this purpose, a tablespoonful of Epsom Salts is a most efficient remedy. If boiled with a teaspoonful and a half of roasted coffee, for a couple of minutes in an earthen vessel, and after it is allowed to draw for a few minutes and strained, the taste will be covered.

A tablespoonful of Castor Oil, mixed with an equal quantity of Glycerine, flavored with a couple of drops of Oil of Cinnamon is appropri-

ate under the same conditions. From three to five Compound Cathartic Pills, are also suitable for an immediate cathartic.

Cathartics must not be frequently repeated, as this secondary effect is to render the bowels torpid; therefore, the smallest dose and the mildest means which will accomplish the result, should be resorted to, and preferably those which have the peculiarity of not causing constipation after their action. One of the best of this class is Aloes. As a cathartic, the dose is from two to ten grains, but a fraction of a grain with tonics suffices, generally. The remedy is well suited to all causes of debility in this disease, and to cases of hypochondria as with constipation.

With sedentary persons who cannot change their occupation to an active life, and women who suffer from a torpor of the intestines, and consequent constipation, the following pill will be found, in most cases, to overcome the trouble: Take of Extract of Nux-vomica, Extract of Belladonna, each ten grains, Powdered Aloes fifteen grains, Extract of Dandelion thirty grains. Mix well, and divide into thirty pills. Take one pill at night. If the bowels do not move the next morning, another pill should be taken, but usually one day will be sufficient. If this proves too active, the Aloes should be omitted from the formula. The directions for taking will be the same.

After the bowels have been moving regularly for a long time, the pill should be omitted, and only taken again if the regular opening of the bowel does not continue.

For those who cannot take a pill, the same remedy may be given in fluid. Take of Tincture of Nux-vomica and Tincture of Belladonna each two and a half drams, and of Tincture of Aloes and Fluid Extract of Dandelion each five and a half drams. Mix. Dose: A teaspoonful, under the same conditions. The Dandelion is not necessary to the efficiency of the prescription.

The Belladonna and Nux Vomica restore the tone and healthy action of the intestine and seem, in my judgment, essential, particularly the latter, for the cure of many cases of constipation. There are many pills in the market for the relief of constipation, which have merit, as the Eecoprotic pill of Wm. Warner & Co., and the Aperient pills of other leading pharmacutists. Before purchasing any of them, it should be ascertained that they contain Extracts of Nux Vomica and Belladonna or Hyoscyamus.

From ten to twenty drops of the Tincture of Colchicum after each meal will often overcome constipation. Podophyllum is an appropriate laxative for constipation, a quarter of a grain is an appropriate dose. It is often used with benefit with Belladonna, and Nux Vomica, as may also be the Compound Extract of Colocynth, the dose of which for this purpose being two grains. One or two Compound Cathartic pills at night relieve constipation, but do not produce a cure as a rule without the use of Nux Vomica or Strychnine.

Senna is not inappropriate as a laxative. The Confection of Senna may be eaten, one or two teaspoonsful at a time, or a tea of ten ounces of Senna leaves to a pint of water may be made, and one to four ounces taken at a time.

Co-existing dyspepsia will require treatment as directed in that dis-

ease. A general debility will require tonics of Quinine and Iron. The Citrate of Iron and Quinine two drams and a half, dissolved in four ounces of Syrup of Orange Flowers, is one of the best tonics.

*Dose:* A teaspoonful three times a day.

The Syrup or Elixir of Iron, Quinine, and Strychnine, in doses of a teaspoonful three times a day are appropriate. Many other tonics might be given, and particularly suitable to cases afflicted with constipation.

If a person is of a full habit, a teaspoonful of Epsom Salts daily, is an effectual remedy for his habitual constipation.

The regular use of an injection of cold water is a simple and often effectual temporary measure for relieving constipation. A piece of hard soap, about the size and shape of a pigeon's egg, will sometimes excite a movement of the bowels. These are only temporarily useful. An effectual cure almost always depends upon the will, establishing the habit of a regular motion, with the tone restored to the intestine by the use of Nux Vomica and Belladonna. If these are given for a time with Aloes or Podophyllum the cathartic should then be omitted and the Belladonna and Nux Vomica given alone.

If the plan before suggested of having a regular time for stool and allowing nothing to interfere with it were rigidly carried out, and taught by parents to their children, constipation would be a disease as seldom met with as it is frequent now.

#### HOMEOPATHIC TREATMENT.

ACONITUM, BELLADONNA. One or both of these medicines may be advantageously administered, singly, in alternation, or in succession, and in addition to such as have been mentioned with detailed indications (such as Opium, Nux-v. etc.), when the constipation is associated with predominant fullness of the vessels of the head.

*Dose:* Of either medicine, as selected, give three globules in a teaspoonful of water, every six hours, until the predominant head-symptoms are modified, and then every twelve hours, until positive amelioration or change.

#### HOME MEASURES.

In all cases of an inveterate or chronic nature, recourse may, occasionally, be had to an enema, or lavement of tepid or of cold water, as a temporary mode of relief, until the medicine has effected the desired result. The drinking of a tumblerful, or more, of cold water, thrice a day, when fasting,—dashing cold water against the belly, and then applying brisk friction, by means of a coarse towel,—combined with early rising, and daily exercise, (not violent or beyond the strength of the patient, so as to cause suffering,) will be found useful auxiliaries in promoting a regular action of the bowels.

*Electro-magnetism* is another, and most useful, auxiliary, either in cases arising from culpable neglect, or indolence, or from inability, or impracticability, to relieve nature whilst traveling. In chronic cases arising from inertness of the bowels, or a sort of intestinal paralytic debility, the application of electro-magnetism is often superior to any other auxiliary.

**DIET.** The diet ought to be regulated according to the state of the primary digestive organs, and highly seasoned food, or that which contains much fibrous or ligneous matter, such as radishes, cabbages, turnips, green fruits, etc., should be avoided.

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## HÆMORRHOIDS.

### PILES.

**SYMPTOMS.** Enlargement of the veins, or effusion of blood in the cellular tissue of the terminal bowel, either within or without the fundament (internal or external piles); or protrusion and distention of one or more of the inner foldings of the same intestine, with or without bleeding (open or blind piles), preceded or accompanied by pains in the back, the base of the spinal column, and belly; sensation of itching, prickling, tickling, burning, or pressing at the terminal bowel, sometimes extending to the adjacent parts, with, in general, constipation, and not unfrequently derangements of the urinary organs.

**PREDISPOSING CAUSES.** The predisposing causes of the disease are: 1. A constitutional taint. 2. Local debilitation of the vessels by continued excesses, by abuse of warm drinks, purgings, or injections, etc.

**EXCITING CAUSES.** Among the exciting causes are, habitual costiveness, severe exertion on horse-back, use of drastic medicines, of warm, stimulating diet, or of vinous, alcoholic, and fermented drinks, tea or coffee, the excessive use of seasoned food and spices, the suppression of long-continued discharges, sedentary habits, sitting on a cold seat or on damp ground, the pressure of the gravid womb, tight-lacing, or any other cause of local pressure, morbid accumulation of blood in the liver, mental emotions, etc.

The painful practice among surgeons of removing the hæmorrhoidal excrescences by means of the knife or ligature, is much to be deprecated; for, independently of the danger not unfrequently attending the operation, it may occasion serious consequences by a sudden transfer of the congestion to some of the noble organs; in a great number of cases, moreover, it wholly fails, and the disease returns, sometimes even in an aggravated form.

### ALLOPATHIC TREATMENT.

Treatment of Hæmorrhoids (Piles) will consist in the first place in the avoidance of those causes which predispose to congestion of the veins of the rectum (lower bowels.) Active out door life must take the place of sedentary occupation. Constipation must be completely remedied by the means directed for that disease. Attention to diet and the regular habit of emptying the bowels being all-important. Cathartics nor injections will not answer this purpose, though, as directed for constipation, a free cathartic will be necessary, when the bowels have been for a long time inactive and the bowels filled with fecal accumulations. When this condition of the bowels is attended with recurring attacks of bleeding the cathartic is especially useful.



Straining at stool must be avoided, neither must the patient remain long sitting at stool. The inflammation which causes futile efforts at straining, must be restrained by anodyne remedies. These efforts increase the congestion and contribute towards the formation of tumors. Diarrhœa must be treated as directed in that disease. The lax condition of the tissues in diarrhœa aids in the development of piles.

Immediately after the evacuation of the bowels has occurred the anus (opening of the bowel) and the protruding piles should be bathed with cold water. The parts should be carefully dried and annointed with an ointment made by the following formula: Take of Tannin a dram (sixty grains), Pulverized Opium a scruple (twenty grains), and Stramonium Ointment an ounce. Mix. Five grains of Morphine may be used instead of the Opium. In the absence of this ointment before the piles are returned they should be washed and dried as before, and lubricated with Cold Cream, Sweet (Olive) Oil, or Glycerine, before they are returned.

When the piles are protruding, they can be more readily pressed back when the patient is in a stooping position with the hips raised, or supported on his knees, while the chest and head rest on the bed. If the piles become swollen and inflamed and cannot be returned, the patient should remain in bed and cold applications, as cold water, or a cloth wet in a solution of Sugar of Lead thirty grains, Acetate of Morphine ten grains, in a pint of soft water, or poultices, may be used.

The above ointment may be made more curative by thoroughly mixing with it half a dram of Iodine. At night the ointment should be applied again, and if the piles have not protruded, it should be introduced into the rectum with a suppository tube.

Much suffering may be avoided by establishing the habit of having the regular movement of the bowels occur just before bedtime, after which if the piles are returned, as before directed, the sphincter muscle recovers its tone during the night, and the tumor of piles does not escape during the next day. By removing this much irritation, so much has been done toward a cure.

The stools may be rendered soft and unirritating by taking one or two teaspoonsful a day of the following mixture in water: Take of each Magnesia, Sulphate of Magnesia, Precipitated Sulphur, and Sugar of Milk, an ounce, and Pulverized Anise Seed half an ounce. Mix well.

The use of Ergot and Nux-vomica will often overcome the laxity of the tissues about the rectum, which predispose to piles, as: Take of Ergotine (Squibb's Extract) a dram, Extract of Nux-vomica fifteen grains; make into thirty pills and give one night and morning; or take of Fluid Extract of Ergot one and a half ounces, Tincture of Nux-vomica half an ounce. Mix. Take a teaspoonful morning and evening.

It is claimed a cure can be effected by the faithful application of a lotion of Iodine, Tannin and Stramonium, every night, to the part. Take of Iodine thirty grains, Iodide of Potassium six grains, Water eight drops is sufficient, Glycerine an ounce. Mix, and add to the mixture two drams of Tannin, and afterward mix with it, in a mortar, a dram of Extract of Stramonium moistened with sufficient water. Label Pile Lotion. This solution, to be beneficial, should be applied every night.

A suppository of tallow may be formed, with the fingers dipped in this mixture, and inserted into the rectum at night, and allowed to remain until morning. If a greater anodyne effect is desired, five grains of morphine may be added to the solution.

The farther treatment, if required, belongs to the practical surgeon. The most approved and most efficient treatment for the cure of pile is the old and well-tested operation of tying them off. The cure, by this means, is the most invariably complete of any method known. The plan is to thoroughly empty the bowel with Epsom Salts or Castor Oil the evening before the operation. In the morning the patient should, a couple of hours before the operation, take a large injection of a quart or more of warm water, and then take a half a grain of Opium. Then the anæsthetic can be given the tumors exposed with a Thebault's anal Speculum, and the tumors brought within reach with a Vulsellum. A large needle with a stout silk thread is passed through the base of the tumor, the needle removed and the thread tied tight on each side of the tumor, but not tight enough to sever the tumor. Two tumors operated on in this way on each side of the gut, is sufficient to cause the cure of the others, if any exist. The patient will remain in bed, the pain relieved by Opium in doses of a grain. The bowels should not be moved until the fourth day, when Castor Oil may be given, followed by an injection of warm water. After the operation, the urine (water) will generally require removing with a catheter. If the operation is to be done without an anæsthetic the cathartic should be given only about five hours before the expected operation, and, after they move, the warm water injection is given and the patient brings down the tumors by straining over a vessel of warm water. When the tumors are down they are tied as before directed.

Small folds of membrane may protrude from the anus; when inflamed they are troublesome and frequently bleed. They should be removed with the scissors, if not inflamed, and if bleeding follow, Sub-Sulphate of Iron ought to be immediately applied to stop it.

Other plans of treatment are by excision, the hot iron, Nitric Acid, the galvanic cautery or the ecraseur; but the plan of tying them off is to be preferred. The object is to obliterate the tumors.

The plan of causing the obliteration of the tumors by injecting Carbolic Acid into each tumor, with a hypodermic syringe has come quite generally into vogue. A mixture of one part Carbolic Acid to three parts of Glycerine. Four to six drops may be injected into each tumor. A coagulation is immediately formed in the tumor, which results in its obliteration. Carbolic Acid, applied to the tissues, is an anæsthetic, so this operation is not painful, but the inflammation which sometimes results, causes so much suffering as to call for anodynes. For this purpose, Opium and Belladonna may be given by injection into the rectum—a teaspoonful of Laudanum and ten to fifteen drops of the Fluid Extract of Belladonna, in a little Glycerine, will be quite effectual in controlling the inflammation and pain. The injection may be repeated in twelve hours, if necessary. Further means for relieving pain should be by Opium given by the mouth. For this plan of treatment, the same preparation is

required as for the operation by the ligature (tying off), and the after-treatment will be the same.

To prevent the return of piles, after a cure, attention to the general habit is necessary. The regular evacuation of the bowels, and keeping the fecal discharges in a soft state by diet and laxatives, as is directed for constipation.

### HOMŒOPATHIC TREATMENT.

*NUX-VOMICA* is a most valuable remedy in this affection, and is very efficacious against both descriptions of piles, but especially against bleeding piles, particularly for individuals who lead a sedentary life, or who indulge in the use of coffee or stimulating liquids, and also for females during pregnancy—when the hæmorrhoids are attended with shooting, burning, or itching pains, colic, shooting and jerking pain, or pain as if from a bruise in the loins, rendering it difficult to rise or walk in an erect position; and when they are accompanied by constipation and sometimes painful and difficult passing of water, and the other symptoms described, as indicating this medicine, under the head of “Indigestion.”

*Dose:* Eight pills in a teaspoonful of water, night and morning, until amelioration or change.

*SULPHUR* may follow the administration of *Nux-vomica*; and an alternation of these remedies, at intervals of a week or ten days, frequently effects a cure in cases of long standing.

*Dose:* If to follow *Nux-vomica*, to complete the cure, give six globules in a wineglassful of water, every morning the first thing (*fasting*) for ten days.

*PULSATILLA*.—Discharge of blood and mucus during stool, and at other times, with painful smarting and sensation of excoriation in the piles, pains in the back, pallid countenance and disposition to fainting; difficulty in passing water.

*Dose:* Of a solution of eight globules to six teaspoonsful of water (to which add ten drops of alcohol), give a teaspoonful morning and evening, until the whole is consumed. If further treatment then be requisite, pause four days, and recontinue the course in like manner.

*IGNATIA* is indicated by itching and creeping, and also sensation of constriction and excoriation in the posterior passage, and prickings extending deep into the lower intestine; discharge of blood or of bloody mucus, rumbling noise in the belly, and protrusion of the lower intestine, accompanied with acute pain.

*Dose:* Three globules in a teaspoonful of water, every twelve hours, until amelioration or change.

*ANTIMONIUM-CRUDUM*.—Discharge of mucus and of blood at every stool, followed by severe colic and pains in the piles, with throbbing, itching and burning at the fundament, and discharge of glutinous, acrid moisture, particularly at night; frequent determination of blood to the head, with bleeding at the nose; stiffness in the back, shooting pains in the loins, burning and rheumatic pains in the limbs, flatulency and constipation

*Dose:* Of a solution of six globules to two tablespoonsful of water, give a teaspoonful every six hours, until four doses have been given, and then every twelve hours, until positive change.

## HOME REMEDIES.

Take four or five ripe buckeyes just after they come from the tree, remove the outer brownish shell from them; slice them up fine. Put them in a tin cup with enough melted lard to cover them; let them simmer or steep near a fire for an hour or two. Then strain and press out the lard, and when cool, it (the lard) is fit for use. A little of this ointment must be applied to the tumors and within the bowel twice a day.

Take the leaves of Mullen, a large handful. Put in a quart of cold soft water and place over the fire; let it simmer until reduced to a pint; then take out all the leaves, pressing them as dry as possible. Now put all the remaining liquor back over the fire and let it remain until reduced to one-fourth pint or less; put in three tablespoonsful of good, clean lard, and a lump of beeswax as large as a hulled black walnut; let it simmer until all the water has passed off in steam, then take off the fire and stir until almost cold, when you will have a nice smooth salve.

To use.—Apply a little of the salve to *all* the affected parts two or three times a day, rubbing it in well with the finger, reaching well up the bowel. This is reliable and gives permanent relief.

The surgical operation for the radical cure of Piles, which has been of very late years introduced among physicians, and also used to a great extent by specialists who have uniformly charged from fifty to five hundred dollars and even more for the operation, is only this *simple thing*: Take of Carbolic Acid fifteen grains, of pure Glycerine seventy-five grains. Mix. Of this inject with a hypodermic syringe one to three drops (owing to the size of the tumor) into each tumor. This causes the formation of pus or matter and the absolute destruction of the piles, but the pain after the operation is very great and also needless. One hour before the operation an injection of one dram of Tincture of Nux Vomica, one dram Tincture of Stramonium and one dram Laudanum to a quart of water should be used. After the operation, a salve made by adding one dram Arnica Flower, one dram Stramonium (Jimstown Weed) leaves dry, one dram Tincture of Aeonite, to a quart of water; let it simmer slowly until it is reduced to one half pint, then add half a pound of good lard and an ounce of beeswax. Let this evaporate on the back of the stove, or near the fire until all the water is gone, which will be when there is no more steam from it. It will burn very easy. Then pour off and press out all you can from the leaves, etc., and use to rub well on all the affected parts two or three times a day, being careful to reach as far up the bowel as you can. With these precautions you will make a sure, safe, and *almost painless* cure.

It will be best to go to some good, careful doctor who knows his business, to get the hypodermic injections made. The rest you can do just as well.

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WORMS.

## HELMINTHIASIS. INVERMINATION.

The number of worms that are found more or less frequently in the human bowels is very large. Here we will name and speak of three



varieties as being the ones likely to produce any of the symptoms of disease.

First: *Pin worms or thread worms.*

Second: *Long round worm or Lumbricoid.*

Third: *Tape worm or Tania.*

First: The PIN WORM is the smallest of the three; it is one-third to one-half an inch long and as thick as common size thread. It has a very small swelling which it uses for, and out of courtesy we call it, its head. Usually it is found only in the very last part of the intestine and sometimes in the vagina, into which it crawls from the anus. At times, only a few are seen together; sometimes, however, they occur crowded together in large masses, most generally among children.

The symptoms occasioned by this worm, vary a great deal. One of the most common, is a violent, distressing itching of the anus, especially in the evening and at night, and disturbing sleep a great deal. Some children are driven almost frantic by this itching, and are tormented by an almost unaccountable nervousness in consequence of it. Among adults, this itching is scarcely ever so painful and severe. The irritation caused by the worms, sometimes occasions a catarrhal affection of the mucous membrane of the rectum, or a spasmodic contraction of the sphincter, with a constant urging to stool, which is not less distressing than the itching. If a large number of them penetrate into the vagina they cause severe itching, whites, and the constant rubbing is apt to give rise to self-abuse. Beside these less important results, we sometimes meet without any otherwise assignable cause, with more important disturbances, principally of the central nervous system, sometimes resulting in indefinite spasmodic movements, and at other times in eclampsia, epilepsy, chorea, etc. We cannot prove that these affections are caused by worms, but this seems the more probable, as a removal of the worms is sometimes succeeded by an entire disappearance of the nervous disease.

### ALLOPATHIC TREATMENT.

WORMS. For practical purposes, it is sufficient to divide the treatment for worms into that for *seat worms* (ascarides), also called "pin-worms" and thread-worms. *Round worms* (lumbrici), and *tape worms* (taeniae).

Seat worms inhabit the lower bowel (rectum) and large intestine. In females, they sometimes invade the vagina. They deposit their eggs in the folds of the anus and vagina. Remedies, to be effective, must be applied to these parts. One of the best and simplest is a large injection of a solution of common Salt, repeated every third or fourth day until three or four injections are given. Some of the same solution should be applied to the folds of the anus, and, with female children, to the folds of the external genitals.

In cases of females, an injection may be required into the vagina. One injection will kill all the worms that it touches, but the eggs hatch in three or four days, so that the injection needs repeating.

Tea (infusion) of Quassia is, also, effective as an injection. The strength of this tea is two ounces of Quassia chips to a quart of water.

A weak decoction (tea) of Aloes may, also, be used for the same purpose.

In case the last two remedies are used, a solution of Carbolic Acid should be applied with a sponge to the folds of the anus and external genitals of female children.

Should the worms continue to appear, it indicates that they lodge high up in the intestine, and a few doses of Santonine of two to five grains to an adult, and half a grain to a grain to a child, should be given two or three times a day, for two or three days, followed by a purge of twenty grains of Calomel for an adult, or five to ten grains for a child, or of Castor Oil.

The Santonine may be given powdered with a little sugar. After the purge, the injections will complete the cure.

#### HOMŒOPATHIC TREATMENT.

Of all three kinds of worms the expulsion of the *pin worm* is by all odds the most difficult. Internal remedies can do very little good, as these little pests have their home in the very lowest part of the bowels, where medicine taken by the mouth cannot reach them to do any good. But a solution of salt in water about two teaspoonsful to the pint *will* reach them, if used as an injection, and repeated a few times. Or a decoction (tea) of common garlic (*Allium Sativum*) used in full injections for a month; at intervals of three or four days, will make them seek a more pleasant place.

A few doses of Cina. or Sulph. will remove any unpleasant constitutional symptoms remaining after the removal of the worms.

*Dose:* Of either, six pills dissolved in a teaspoonful of water every morning before eating.

*Long worm (lumbricoides).* The intestinal long worm is the most common of all. It is from six to twelve inches long, has a cylindrical body of the size of a goose-quill, tapering at both ends. Its common abode is the small intestine; exceptionally the worm wanders into the stomach. Very seldom only one worm is present in the intestine, generally there are several together, sometimes as many as twenty or thirty, and even *many* more.

The symptoms caused by the presence of these worms, vary greatly. In the majority of cases there are no very prominent symptoms present; it is only by accident that the presence of worms is generally discovered; the only symptom is perhaps an increased longing for bread, and potatoes; and perhaps a less fresh and healthy complexion. More deep-seated and more general derangements, may be caused by a number of worms together, or by the agglomeration of the worms into large balls, or by their entrance into some other organ; or else the bowels may be exceedingly irritable, in consequence of which a small number of worms may cause intestinal catarrh or enteritis, together with their consequences. Among these latter, we number the nervous phenomena caused by worms, which have already been mentioned in the paragraph on pin-worms.

The ailments caused by lumbrici, often resemble greatly other more or less important processes, such as gastric fevers, typhus, dysentery, and

likewise the above-mentioned nervous derangements; it is of no small importance to ascertain their origin at an early period. These nervous derangements manifest themselves by various phenomena, of more or less constant occurrence. The appetite becomes fitful, or the patient has a more or less exclusive, or, at any rate, decided hankering for farinaceous food; the nose and anus itch violently; the pupils are considerably dilated; the eyes are surrounded with dark margins; the patients are of a changeable and irritable mood; bowels act irregularly, at times constipated, at other times alternately constipated and loose, with frequent changes of this character. It sometimes happens, that their irritation occasions a real gastric fever, which does not always disappear immediately after the removal of the worms; large balls of these worms, may even cause the same functional or structural changes as hard masses of fecal matter. Properly speaking, it is only in children, that lumbrici cause nervous derangements, and it is well, when these derangements manifest themselves, that you should direct your attention to the presence of worms.

In giving medicines for worms, the bowels should be as empty as they conveniently can, so that the remedy may act on the worms as energetically as possible. For this reason, it is best to give remedies for worms in the morning before breakfast, and if cases are rebellious, the patient should abstain from eating till noon, or through the day.

Medicines ought not to be given to children, for worms, merely on suspicion, but only when there is positive evidence of their presence.

For round worms, one of the most efficient remedies is the Fluid Extract of Pink Root and Senna. The dose for an adult is a tablespoonful, and half a teaspoonful to a teaspoonful for children, every four hours until it purges. This will probably end the round worm.

Wormseed Oil, in doses of five to fifteen drops on sugar, three times a day for two or three days, followed by a purge of Castor Oil, is successful treatment. It may also be given with the Fluid Extract of Pink Root and Senna.

Santonine is an efficient remedy against the round worm. It is tasteless, and may be given with sugar, or sprinkled on bread and butter. The dose is from half a grain to five grains, according to the age of the patient. It should be given three times a day for a couple of days, followed by a purge of Calomel or Castor Oil. After the purge, it should be given for a couple of days, to destroy any worm which may recently hatch.

Another effectual plan is to take a purge in the morning, fast during the day, and take at night five grains of Santonine with twenty grains of Calomel, for an adult, or one or two grains of Santonine and five grains of Calomel for a child. The next morning a purge of Senna should be taken. An infusion (tea) of Senna for this purpose may be made by steeping an ounce of Senna leaves in a pint of water. One-fourth of this is a dose for an adult, and one or two tablespoonsful for a child. It can be flavored and sweetened to suit the taste.

The common remedy, Turpentine, ought not to be given, unless necessity compels it. It is not reliable against worms unless given in doses of a tablespoonful, and then unpleasant effects may follow. If used, it should be given with twice the amount of Castor Oil.

## HOMŒOPATHIC TREATMENT.

The long worm is most surely removed by *Cina*. (worm seed) and the form in which it is best is the Santonine (an alkaloid of worm seed as Quinine is of Peruvian Bark.) This can be given in doses of one or two grains, twice each evening for two days; then omit for one week and repeat until twelve doses are taken. This remedy can usually be obtained in the shape of candy called Santonine Lozenges containing one grain each, and are to be given as directed above.

After the child has taken this remedy, the clothing or bedding which comes in contact with the urine is almost always stained yellow or straw-color, which is *no* cause for *any* alarm. It is best to keep the child from eating farinaceous food the day previous to taking the medicine.

For conditions or symptoms remaining after the worms are removed, see *Cina*, *Nux Vomica*, *Spigelia*, *Mercurius*, *Pulsatilla*, at the close of this chapter.

The TÆNIA or TAPE-WORM is from three feet to twenty or more yards long, is smooth the best part of its length, and about a quarter to a half of an inch wide; towards the extremity representing the head, its shape is more rounded and thin, and the head itself is thin as a thread. The color is of a faintish white, with a yellowish tint. The worm consists of the very small head, which is sucked fast in the intestinal mucous membrane, and to which a neck of the thinness of a thread, and half an inch in length, is attached, from which neck, the single links of the worm afterwards proceed. At first these links are narrow, but rather short than broad, so that the worm exhibits a series of closely-crowded transverse lines; the further removed from the head the more the length of these links increases in proportion to their breadth, until the last links acquire a length of half an inch to one inch and more.

The worm grows in length from the head outward, until the last full-grown links become, sooner or later, detached, and are expelled with the stool. The tænia has its principal abode in the small intestines, and is only exceptionally met with in the large. Generally, there is only one tænia found in the same individual, although we are acquainted with one case where twenty-one worms were discharged by the same person. Such cases are, of course, very rare.

As in the case of other worms, so are the disturbances caused by the tænia exceedingly various, both in kind and degree of intensity. It may be safely asserted that, in the majority of cases, the tænia causes very little trouble, and that the patients do not become aware of its existence until a few links have been expelled with the stools, when a variety of ailments and distresses are forthwith traced to the tænia, which, in reality, are the work of the imagination, rather than of the tænia. The mildest disturbances which the tænia occasions, are winding, twisting, colicky pains around the navel, not very intense, setting in paroxysmally, more particularly after eating certain kinds of food, and in the morning when the stomach is yet empty. Generally, these pains are associated with a little nausea, or even with a sensation of canine hunger, but these symptoms are so trifling that they are only complained of when the patient has become perfectly certain that a tænia is growing in his bowels. Under circumstances which it is difficult to analyze, more in-



tense disturbances may show themselves, a disconnected enumeration of which we here subjoin: violent colicky pains in the bowels, or a creeping or crawling sensation as from a worm, around the umbilicus, with increased secretion of saliva, nausea, even vomiting, especially after eating fermented food, herring, sharp condiments, sour fruit. Increased appetite, canine hunger, in spite of which the patient emaciates; itching of the nose and anus; sickly complexion; low spirits and irritable mood; irregular stool, alternately normal and diarrhœa; headache, disturbed sleep, vivid dreams; palpitation of the heart; changes in the sound of the voice. Finally, the above-mentioned more striking affections of the general nervous system, which can be traced with more certainty to the presence of tænia.

The presence of tænia can only be diagnosed, with perfect certainty, if the patient has actually passed links of the worm. Many lay-persons are too anxious to attribute their ailments, gastric derangements, such as heart-burn, water-brash, etc., to the presence of tænia; especially if they experience a sensation as if a worm were crawling about in the stomach, or up the œsophagus; if, in such a case, no links are passed within a few weeks, it is pretty certain that there is no tænia. Most links are passed spontaneously at the time of the new moon.

In the treatment of tape-worm the patient should fast for a day, taking a little milk or beef tea only. In the evening a purge should be taken of a tablespoonful of Castor Oil, a tablespoonful of Epsom Salts or three drops of Croton Oil. After this purge operates, the worm is exposed to the full effect of the medicine, which should then be taken.

One of the most efficient remedies we have against tape-worm is Pumpkin Seed. Two ounces of fresh seeds are to be pounded in a mortar with half a pint of water until the husks are separated and the meats thoroughly incorporated with the water. The mixture is strained and taken, the fasting in the meantime continuing. The dose may be repeated in three hours, and in three hours more a purge of Castor Oil should be taken. If the worm is not removed, *head* and all, the treatment is to be repeated the next day.

The pressed Oil of Pumpkin Seed may be given instead of the above emulsion in doses of a tablespoonful two or three times and followed by the Castor Oil purge.

After the preparatory treatment by fasting and a purge, a dram teaspoonful of the Oleo-Resin of Male Fern (*Felix Mas*), give a fourth part thirty minutes apart, on two successive days, followed by a purge of Castor Oil (a tablespoonful), or three drops of Croton Oil is an effectual remedy against tape or round worms in persons of any age. It can be given in syrup or mucilage.

Should necessity compel the use of turpentine, one or two tablespoonsful, with an equal quantity of Castor Oil, should be given after the preparatory treatment.

As a preventive of intestinal worms of all kinds only filtered water should be drunk. Meat should be thoroughly cooked, but it is not necessary to cook it until dry. Fruit and vegetables should be made clean before eating. Tonics following the treatment are useful.

## HOMŒOPATHIC TREATMENT.

**TAPE-WORM** is easily expelled by the use of either of the following :

Take *Koussou* three to four drams, place in a common goblet or tumbler, and pour cold water upon it until the glass is well filled, being careful that none of the powder is left floating on the surface; let it stand over night, and in the morning after taking nothing more than a *small* cup of black coffee, drink the medicine in two portions, half an hour apart.

If there is a disposition to vomit, a little lemon juice may be swallowed. In from two to five hours after taking the medicine, the worm is expelled. No need of a cathartic.

**PUMPKIN SEEDS** two ounces, peel off the outer covering, bruise well, mix in a little water, and use as directed above for *Koussou*, except if the worm does not come away in six hours, use a cathartic or an injection of Oil.



## PROLAPSUS ANI.

## FALLING DOWN OF THE LOWER PART OF THE INTESTINES.

A protrusion of a portion of the rectum or of its internal coat from the anus, is denominated a *prolapsus* or *prudencia ani*. In some cases a considerable portion of the rectum comes out to the extent of three or four inches, in others only a little, it presents a circular dark red, pad-like lump, from the size of a small hulled black walnut to that of a goose-egg.

**CAUSES.** Anything which tends to weaken the muscles which support the intestine. Among these are the frequent use of cathartics (physic), especially those containing Aloës, Epsom Salts, etc. The presence of pin worms, (*ascarides*) in the lower portion of the intestinal canal, habitual costiveness, piles, straining at stool during diarrhoea, or dysentery (flux), or when straining to pass water. This is much more frequent among children than grown people. In some cases the intestine remains out a considerable time without any ill consequences, but more commonly it swells and inflames very speedily.

## TREATMENT.

**TREATMENT.** When this accident occurs, some person of strong and steady nerve, should at once attempt to replace the protruding parts, by *first* oiling the parts well with fresh lard, Sweet Oil, Tallow, fresh butter not salted, or sweet cream; then *second*, make steady *not very hard* pressure in the center of the protruding parts, with the well oiled thumb or thumb and fore finger; occasionally, if necessary, making light pressure on the outside of the tumor with the thumb and finger of the other hand, near the anus; when it will slowly, or in some cases, quickly return to its proper place. If, after carefully and *perseveringly* trying for a reasonable time, ten or fifteen minutes, (which will appear to be a long time) the parts do not return, send at once for a good and careful physician.

This trouble having once occurred, is liable to occur again. The best means of preventing this, is a quiet position and careful attention to the diet, which should consist of the plainest aliment; rye mush and sugar is very good food in such cases. The Homœopathic remedies, which will usually permanently relieve the tendency to return and, also help in the moment of the accident, are in the order of their names, *Nux-vomica*, *Ignatia*, *Mercurius*, *Sulphur*, *Podo*.

Hydropathic in connection with careful diet, take a cold sitz bath every evening. This bath is also generally used by the homœopathic.

Gently push the protruding part back into the body and inject into the bowels the following: Take of Crowfoot or Alum Root, White Oak bark, each in coarse powder, a tablespoonful; make half a pint of strong decoction (tea) to which add half a tablespoonful of powdered Alum. This should be injected cold two or three times a day; when very severe a bandage will have to be worn to keep the bowel from falling. Internally let the child drink freely of a tea of equal parts of Golden Seal and Solomon's Seal.

The child should be taught not to strain during stool, and its diet must be similar to that recommended for costiveness. If while the bowel be firmly held in place by a tight bandage, the child be made to lift several times every day, a weight proportioned to its strength it will aid materially in overcoming the difficulty.

## Part Sixth.

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### CHAPTER XIV

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#### DISEASES OF THE LIVER AND SPLEEN.

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##### INFLAMMATION OF THE LIVER.

This disease is divided into the Acute and Chronic: the latter generally goes by the name of Liver Complaint, although a careful consideration of symptoms will frequently discover that the real disease is in the stomach and intestines; however, in many cases, the liver itself becomes much affected from this cause, and in itself deserves considerable attention.

When the disease has been for a long time unchecked, and the inflammation becomes deeply seated in the substance of the liver, an abscess frequently forms, bursting either externally or internally; in the latter case often proving critical, inducing hectic fever.

##### ACUTE INFLAMMATION OF THE LIVER.

This disease is much more common in tropical climates than with us. There, a high mode of living, exposure to heavy dews or damps in the evening, and the powerful rays of the sun by day, are amongst its principal exciting causes; but it may also arise from violent mental emotions, the use of stimulating or alcoholic drinks, suddenly suppressed evacuations, strong emetics or purgatives, the abuse of mercury, gall-stones, external injuries, or injury of the brain.

**SYMPTOMS.** These differ according to the seat of the inflammation. When it occurs on the outer surface or convex side, the symptoms closely resemble those of pleurisy; there is generally a violent pain under the false ribs on the right side, sometimes resembling stitches, at others burning—shooting to the breast-bone, the right shoulder-blade, and point of the shoulder, and even affecting the right foot,—sensation of numbness or tingling in the arm of the same side, the pain increased by inspiration; a short, dry cough, and the symptoms of inflammatory fever; bowels irregular, generally constipated, and stools, in the majority of cases, of an unnatural color.

In this form the patient can only lie on the *left* side.

When the seat of inflammation is on the inner or concave side of the liver, the pain is much less, and the patient complains rather of a sensation of pressure than actual pain, but the whole biliary system is much affected. The eyes and countenance become yellow, and sometimes complete jaundice declares itself; the urine is orange-colored the evacuations mostly hard, and generally of a whitish or gray color. We also find bitter taste in the mouth, vomiting, and considerable distress. The patient can only lie on the *right* side. Inflammatory fever is present in this form like-



wise. In both forms, on examination, the region of the lower ribs, on the right side, will usually be found hot, tumefied and painful on pressure.

Inflammation of the liver, unless properly treated, is apt to assume the chronic form; it may also end in suppuration externally, or internally by a communication either with the lungs or intestinal canal, or by an abscess in the substance of the organ itself, or may terminate in indurations or other alterations of structure, in gangrene, or in the formation of adhesions.

The disease may terminate by resolution, critical transitions to other organs, piles, diarrhœa, bleeding at the nose, or eruptions on the skin generally, erysipelas.

#### ALLOPATHIC TREATMENT.

The treatment of congestion of the liver, will consist as far as possible in the removal of the causes of the disease. In some instances there are sedentary life, and too generous living. Great benefit will be derived in some of these cases from horseback riding, hunting, walking, etc., while saline laxatives, as Seidlitz Powders, directly diminish the congestion. The use of beer, and spirits should be discontinued, and the diet made more simple and plain. If the congestion is of long continuance, benefit will result from the use of Dilute Nitro-Muriatic Acid. It may be given in doses of ten or fifteen drops. It should be given before meals, largely diluted in sweetened water, or preferably in a couple of ounces some bitter infusion, or infusion of Columbo (one ounce of simmered in a pint of water). Bathing the right side with a solution of Nitro-Muratic Acid—three ounce to a gallon of water, is of advantage. Drinking the water from some of the sulphur springs, is sometimes useful. If the patient is debilitated, the use of the Nitro-Muriatic Acid should be associated with the use of Citrate of Iron and Quinine, a dram and a half dissolved in four ounces of Lemon Syrup, or of Syrup of Orange Flowers of which a teaspoonful may be taken after each meal.

If the congestion of the liver depend on disease of the lungs or heart, treatment, will of course, have reference to those affections, and remedies addressed directly to the congestion of the liver, will be only palliative.

In inflammation of the liver, there is great danger to life. The intense pain should be relieved by the use of Opium, in doses of a grain, at such intervals as may be necessary to relieve the pain—one or two hours, or longer, apart. The pain must be relieved. Laudanum may be given by injection in doses of a teaspoonful in a tablespoonful of thin Starch, and repeated once a day. The anodyne effects of this may be increased, if necessary, by giving Opium in doses of a grain, or Morphine in doses of a quarter of a grain, by the mouth.

A liniment of equal parts of Laudanum, Tincture of Aconite, Chloroform and Soap Liniment, may be continuously applied to the right side over the liver, by means of a flannel saturated in the liniment, and covered with oiled silk.

The bowels may need acting on mildly, preferably by an injection of warm water.

In this disease there is especial danger from suppuration.

Tonics and nutritious food are early called for. The best tonic remedy is Quinine and Nitro-Muriatic Acid. Two or three grains of Quinine every four hours, will be appropriate. The Nitro-Muriatic Acid should be given in doses of ten to twenty drops, largely diluted in sweetened water, at about such intervals as food is given, as an aid to digestion.

Such food as milk, eggs beaten up with sugar and water or milk, given raw, strong beef-tea, and animal essences, are appropriate.

Should the inflammation, whether embracing the whole organ or limited to a portion, result in abscess which can be distinguished through the abdominal wall by feeling with the hand (palpation), it is proper to open it. If the surface of the liver is adherent to the inner surface of the wall of the abdomen, the opening may be made directly into the abscess. But if the adhesion has not plainly taken place, an incision should be made down to the peritonium (lining membrane of the cavity of the abdomen) and the wound filled with Lint or Oakum. In three days the membrane will be adhered so the opening can be made with safety, which may be done either with the knife or trocar.

Generous diet, with the Quinine will probably enable the patient to survive.

Should the abscess open into the intestine or bronchial tubes, it may be necessary to give anodynes (as Opium) in small doses to relieve the irritation of those parts.

#### HOMEOPATHIC TREATMENT.

ACONITUM, BELLADONNA, MERCURIUS, LACHESIS. *Aconite* is especially indicated in the commencement of the attack, and may always precede the other remedies, *when* there is violent inflammatory fever, attended with insupportable *shooting* pains in the region of the liver, with tossing, restlessness, and great anxiety and anguish.

*Dose:* Of a solution of eight globules to two tablespoonsful of water, give a teaspoonful every three hours, until improvement or change.

BELLADONNA may be advantageously administered, after *Aconite* has subdued the preceding symptoms, or from the commencement, when the following indications present themselves; oppressive pains in the region of the liver, which extend to the chest and shoulders, distention of the pit of the stomach, sometimes extending across the region of the stomach, producing a sensation of tension, with difficult and anxious respiration; determination of blood to the head, with cloudiness and giddiness, sometimes causing faintness; great thirst, tossing about at night, and sleeplessness. *Belladonna* may be advantageously alternated with *Nux-vomica* in such cases as coincide with the joint indications afforded for both of these medicines, especially if the patient has been addicted to excessive use of fermented liquors. *Belladonna* is, moreover, especially appropriate when the temperament of the patient exhibits a combination of the sanguine and lymphatic.

*Dose:* If *singly*, dissolve eight globules in two tablespoonsful of water, and give a teaspoonful of the solution every two hours, until amelioration or change. If no positive and permanent improvement should ensue within four hours after the third dose, pause two hours *more*, and proceed with the next medicine. If in *alternation* with *Nux-v.*, the like solution of each administered in rotation, by teaspoonsful, at intervals of two hours.

MERCURIUS will, in the majority of cases, prove effectual when *Belladonna* has failed to produce a favorable impression on the disease, and should accordingly be administered six hours after the third dose of the foregoing remedy in such instances. The particular indication for *Mercurius* are as follow:

Considerable fullness or tumefaction in the region of the liver, with *pricking*, burning, or *oppressive* pains, not allowing the patient to lie long on the right side, and sometimes augmented by movement of the body or part affected; pain in the shoulders; bitter taste in the mouth, want of appetite, thirst, and continual shivering, sometimes followed by sweating, but without relief, with pale yellow color of the skin and eyes; also, in more advanced stages of the complaint, when there is induration of the liver. This medicine may moreover, like *Belladonna*, be administered in alternation with *Nux-vomica*, under similar conditions. If the patient is of a lymphatic temperament, or is distinguished by softness of the muscular system, there will be additional reason for selecting *Mercurius*.

*Dose:* A solution of eight pills, in all respects, *singly*, or in *alternation*, as directed for *Belladonna*.

BRYONIA, CHAMOMILLA. Bryonia, when the pains in the region of the liver are mostly shooting, or consist of an obtuse pressure, with tension and burning, increased by touch, coughing or respiration, and especially during inspiration, or much exacerbated by movement; also when the symptoms are attended with violent spasmodic oppression of the chest; rapid and anxious respiration; bitter taste in the mouth, tongue coated yellow, and *constipation*. Bryonia, like Chamomilla, is particularly useful in cases which have been excited by mental emotions, such as a violent paroxysm of anger, and is well adapted to persons of nervous or bilious temperament, and of choleric disposition.

*Dose:* Of a solution of eight pills to two table-spoonfuls of water, give a teaspoonful every three hours, until distinct amelioration or change. In cases in which the pain is very severe, the doses should be repeated every two, three and four hours, progressively, according as improvement ensues, and, subsequently, every six hours.

CHAMOMILLA is more particularly required in the milder forms of the complaint, or, more correctly speaking, in simple irritation of the liver, when there are pressive pains, pressure in the stomach, oppression of the chest, and a sensation of tightness under the ribs; yellow color of the skin, pains not aggravated by motion, etc.; tongue foul and yellow, bitter taste in the mouth; paroxysms of great anxiety. Chamomilla is also almost a specific, when the above symptoms have been brought on by a fit of passion.

*Dose:* In all respects as directed for Bryonia.

NUX-VOMICA is particularly indicated when the pains are shooting and pulsative, and attended with excessive tenderness in the region of the liver, to the touch, pressure in the region of the stomach and under the ribs, with shortness of breath and constipation; also when enlargement and induration occur; and, in the chronic form, when there are marked symptoms of derangement of the stomach. This medicine is es-

pecially appropriate for the treatment of patients of a sanguine or bilious temperament or choleric disposition.

*Dose:* In acute attacks, four globules in a teaspoonful of water every two hours, until a degree of effect is apparent, and then every six hours, until positive improvement results. In *chronic* cases, six globules in a tablespoonful of water, every night at bed-time, for a week, after which, a pause of four days should ensue, the administration being similarly resumed, if necessary, and so on.

PULSATILLA. Sensation of tension in the region of the liver, and pressure or dull pain in the region of the stomach; oppression at the chest, bitter taste, yellow tongue, nausea; loose, greenish, and slimy stools; excessive anxiety, especially towards evening or during the night. (Temperament lymphatic; disposition mild.)

*Dose:* Of a solution of six globules to two tablepoonsfuls of water, give a teaspoonful every six hour, untill amelioration or change.

SULPHUR is valuable to follow any one of the preceding medicines, which, although apparently indicated, does not speedily produce a decided action; or when the disease continues, although in a diminished degree; it is particularly efficacious, after Nux-vomica, to combat the bad consequences of the disease. In many instances in which the distinct analogy between the symptoms of the disease and those which characterize one or more of the *other* medicines enumerated herein, has led to the administration of such other medicine or medicines, and when such treatment has *failed* to be followed by adequate benefit, the intermediate administration of a single dose of Sulphur, from time to time, has served to awaken the susceptibility of the system to the action of such other medicine (when evidently appropriate), and the repetition of its administration after such dose of Sulphur has been followed by admirable results.

*Dose:* To assist the action of the other medicines, give four globules in a teaspoonful of water, following up the treatment with the remedy judged most appropriate to the case, after an interval of twelve hours.

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### SUPPURATIVE INFLAMMATION OR ABSCESS OF THE LIVER.

SULPHUR, SILICEA, KALI-C., LYCOPodium. These four medicines may be numbered amongst those which have proved most useful in cases of suppuration of the liver. The selection from amongst them must, of course, depend upon the particular features of each individual case, and must be regulated by instituting a comparison between the symptoms of the disease and those which are recorded as characteristic of each of these medicines in the article on that subject.

*Dose:* As for Nux.

DIET.—The regulations for diet which are prescribed for the treatment of Fevers in general, and such other regulations as are detailed in the article on "INDIGESTION," are equally applicable to cases of Inflammation of the Liver.



## LIVER COMPLAINT OR CHRONIC INFLAMMATION OF THE LIVER.

In this form of the disease we find many of the foregoing symptoms, but in a modified degree; and in addition, a continued pain or uneasiness in the right side seldom leaves the patient, who gradually falls off in flesh and loses strength; and there is, not unfrequently, present an occasional cough with expectoration; sometimes considerable perceptible enlargement of the liver, either continual or returning periodically, with a number of dyspeptic symptoms; high-colored or red urine, yellow tinge of the skin and eyes, occasional febrile symptoms: the pulse, except during these attacks, generally quick but regular.

### ALLOPATHIC TREATMENT.

Chronic Inflammation (Cirrhosis) of the Liver is generally caused by the use of alcoholic drinks. The patient generally pays no attention to this trouble until it causes dropsy of the abdomen. It is then safely regarded as incurable.

In the early stages of the disease, by the abandoning of the use of spirituous liquors, and the use of Arsenious Acid, and the Iodides, as in the following formula, recovery can doubtless be made. Take of the Iodide of Ammonium a dram, Fowler's Solution half a dram, Tincture of Calumbo an ounce, Water four ounces. Mix.

*Dose:* A teaspoonful three times a day, before meals.

The use of Dilute Nitro-Muriatic Acid in doses of ten or fifteen drops in sweetened water three or four times a day is beneficial.

In the later stages the treatment is the same as for Dropsy of the Peritonium (Ascites)

### HOMOEOPATHIC TREATMENT.

With proper modifications as to the frequency of doses, the regulations prescribed in the foregoing article (pp. 332 to 334) are equally applicable to this variety of the disease. The medicines enumerated should accordingly be selected in conformity with the indication therein set forth. The following, however, are especially appropriate, in the majority of cases of Chronic Inflammation of the Liver, and the under-mentioned rule for the dose is generally, reliable, as regards other medicines.

**NUX-VOMICA, BRYONIA, SULPHUR, SEPIA.**—There are comparatively few cases (if any) of Chronic Inflammation of the Liver, in which one or more of these medicines, either singly, successively, or alternately, will not be required; for indications see pages 332 to 334.

*Dose:* Of the medicine selected give four globules in a teaspoonful of water, morning and evening, for a week (or until an earlier subsidence or change in the symptoms); after which, pause four days, resuming the course, as before, if necessary, and so on.

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### JAUNDICE.

**SYMPTOMS.**—Yellow color, varying in shade from a pale saffron to a dark-brown yellow, appearing first in the eyes, then extending over the

surface of the whole body; hard, whitish evacuations; orange-colored urine; symptoms of deranged digestion, and sometimes, tensive pain or pressure in the region of the liver.

In severe cases, even, the perspiration will impart a yellow hue to the patient's linen.

**EXCITING CAUSES.**—The disease frequently declares itself without being plainly referable to any exciting cause; the principal causes, however, are affections of the liver, indigestion, poisonous substances, taking cold, powerful mental emotions, emetics, drastic purgatives, or internal obstructions, such as gall-stones, or even worms obstructing the biliary duct.

**PREDISPOSING CAUSES.**—Amongst the predisposing causes may be enumerated a too sedentary or irregular mode of life, indulgence in spirituous liquors, and the frequent use of aperients.

It may be also remarked, that this disease frequently assumes the intermittent type.

Jaundice is not, of itself, to be considered as a dangerous disorder, but rather as an indication of some internal derangement, which, if neglected, may entail serious consequences; for example, dropsy, hectic fever, or general wasting away.

#### ALLOPATHIC TREATMENT.

Jaundice is a symptom which accompanies other diseases of the liver, and in such instances its treatment is that of those affections.

Generally there is a catarrhal inflammation of the upper part of the intestine (duodenum) requiring that the food should be light and unirritating to this part of the digestive tube. Milk, eggs, animal broths, broiled beef steak, oysters, fresh fish, are suitable. Bread, arrow-root, rice, potatoes, beans, pies, etc., may, by calling upon the functions of that part of the intestine, continue the disease.

Laxatives may be called for, but must be mild. Injections are to be preferred, if there is constipation. A Seidlitz powder may be taken.

In this, as in other affections of the liver, the Nitro-Muriatic Acid is useful in doses of ten drops in sweetened water three times a day. Manganese has appeared useful, in catarrhal jaundice. Take of dried Sulphate of Manganese forty grains, Purified Ox Gall sixty grains, Resin of Podophyllum two and a half grains. Mix well, make a mass and divide into twenty pills.

*Dose:* One three times a day.

In Malarial Jaundice, after from ten to twenty grains of Quinine has been given, Manganese is also useful. Take of Dried Sulphate of Manganese forty grains, Chenoidine sixty grains. Mix and make into twenty pills.

*Dose:* One three times a day.

A small blister over the stomach has appeared useful

Pain should be relieved with half grain doses of Opium or ten drops of Laudanum, or a grain of the Extract, or one or two teaspoonsful of the Tincture of Hyoscyamus.

When jaundice has continued for weeks or months, an irremediable

obstruction to the flow of bile. If it cannot be removed, remedies are directed to aid in the elimination of bile by the kidneys, and skin and to support the powers of life.

To increase the flow from the kidneys the diuretic pill, composed of one grain each of Extracts of Squill and Digitalis and Calomel, may be given, one pill every three hours until it acts freely on the kidneys. Or the Fluid Extract of Broom may be given in doses of half a teaspoonful. Watermelon or Pumpkin Seed tea may be useful.

The skin may be sufficiently acted on by hot bathing. If not, by the hot wet pack.

Bile may be supplied to the aid of digestion by giving one or two capsules filled with ox gall after each meal.

It should be remembered that the yellowness will exist in the skin for some time after the bile duct is open, so that the bile flows naturally into the intestine.

### HOMŒOPATHIC TREATMENT.

MERCURIUS, CHINA. These are two of the best remedies in the treatment of the disorder.

MERCURIUS may be denominated a specific remedy for jaundice in a great number of cases, when indeed the patient has not been subjected to drenching courses of Mercury or Calomel.

*Dose:* Six globules in a teaspoonful of water, every six hours, until four doses have been given, and then every twelve hours, until permanent and positive amelioration or change.

CHINA is, however, to be preferred to *Mercurius* in cases in which Mercury has been too copiously administered. *China* is also particularly appropriate when the attack has come on after violent corporeal exertion, or when it can be distinctly traced to indigestible substances; also, when the disease assumes an intermittent character. In a great number of cases, indeed, in which jaundice recurs periodically, or in which patients, already predisposed to its attacks, have been unavoidably or inadvertently exposed to some directly exciting cause (such as over-exertion, cold, etc.) *China* will operate as a preventive resource, and will commonly ward off the development of an incipient attack.

*Dose:* For the treatment of jaundice, in an advanced stage, give four globules in a tablespoonful of water, three times at intervals of four hours and at intervals of eight hours, until amelioration or change. As a preventive resource, give six globules in a wineglassful of water, night and morning, for three days, then pause two days, suspending treatment, or resuming the course, similarly, according to the state of the patient.

NUX-VOMICA is preferable in the generality of cases, even in such as have been directly occasioned by violent emotion, when the bowels are confined, or *alternately* confined and relaxed. *Nux-vomica* is also especially appropriate when sedentary habits, or study, or indulgence in spirituous liquors, appear to have been the predisposing, or, partly, the *exciting* causes of the attack.

*Dose:* Three globules in a teaspoonful of water, every four to eight hours.

DIGITALIS. A most important remedy in many cases of this disease;

the following are the principal indications for its employment: nausea, retching, or vomiting, and purging of greenish fluid; or sluggish state of the bowels, with *white, gray, or clay-colored evacuations*; tongue clean, or coated white; *pressure at the pit of the stomach and region of the liver*; alternate heats and chills.

*Dose:* Of a solution of six globules to three table-spoonsful of water, give a teaspoonful every two hours, until the violence of the symptoms become modified; and then every four hours, until positive amelioration or change.

#### INFLAMMATORY JAUNDICE.

Cases in which jaundice is associated with symptoms of inflammation and pain on pressure in the region of the liver, are so closely analogous to inflammation of the liver, that the reader is referred, on this subject to the foregoing articles, treating especially of that disease.

#### GALL-STONE.—ALLOPATHIC TREATMENT.

In the treatment of the passage of gall stones, is in the first place to relieve the pain, and for this purpose the best remedies are Opium and Belladonna. If a physician is at hand, he will give a hypodermic injection of a quarter of a grain of Morphine with a sixtieth of a grain of Atropine. The effects of the anodyne should be maintained until the pain, caused by the passage of the stone, ceases. An injection of a teaspoonful of Laudanum with half a teaspoonful of Tincture of Belladonna, in a couple of table-spoonsful of thin starch may be made, or the same remedies given by the mouth in half the quantities. The pain may be intense enough to induce the physician to resort to the inhalation of Chloroform or Ether.

Belladonna Ointment may be applied over the seat of pain, and covered with a hot flaxseed meal poultice.

A hot bath is sometimes successful in mitigating pain. No rule can be given for giving Opium in this disease, but when larger doses have been given for a few days, Opium poisoning may occur unexpectedly.

Expulsion of the calculus (stone) may be aided by cathartics, for this purpose salines are to be preferred, as Epsom Salts and Seidlitz Powders.

No remedies are known which can be given in sufficient quantity to dissolve the stones.

As a preventive measure the Phosphate of Soda should be given in doses of from twenty to thirty grains, two or three times a day. The remedy should be persevered in for months. It has the property of rendering the bile more liquid, and so prevents the formation of new gall stones.

A change from a sedentary life is desirable. A simple, wholesome diet, and attention to the general health are called for.

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## CHAPTER XV.

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### INFLAMMATION OF THE SPLEEN.

**SYMPTOMS.** Sharp, pressing, or shooting pains in the region of the spleen, beneath the lower ribs on the left side, with, in most cases, a high



degree of fever with general derangement; and sometimes enlargement and tumefaction; when very severe, vomiting of blood.

From our very imperfect knowledge, however, of the physiology of this organ and its relation to the others, this disease, except when it presents itself in the tangible form above mentioned, is extremely difficult to discover. Its best characteristics are tenderness or sensibility on pressure in the region about the spleen, with general debility; paleness of the complexion, bloodless appearance of the conjunctiva (the superficial membrane lining the eyelids, and extending over the fore part of the eyeballs), languid circulation, and tendency of the extremities to become cold.

It is a rare disease in this country, but sometimes declares itself in hot seasons, when it is not unfrequently mistaken for other affections. It may, however, arise in individuals of delicate constitutions, or in children, when exposed to the influence of marshy miasms, particularly when to that cause has been added insufficient clothing, want of exercise or proper nutriment, and long-continued mental disquietude.

#### ALLOPATHIC TREATMENT.

Acute inflammation of the spleen is to be treated on the same general principles as inflammation of the liver. The same anodynes will be required, and they are to be administered in the same way. The constant application of cold by means of a bladder of pounded ice over the region of the spleen is particularly appropriate. Benefit will also result from the use of Ergot in large doses. A teaspoonful of the Fluid Extract of Ergot may be given three times a day.

By far the most common affection of the spleen is a chronic inflammation known as *enlargement of the spleen*, which occurs in malarial districts, or where intermittent fever prevails. It is also known as *ague cake*. This affection, occurring periodically, requires the use of Quinine in full doses—five or ten grains given six hours apart, until a slight ringing of the ears is produced. For continued use for enlarged spleen, it should be continued with Sulphate of Iron. Take of Sulphate of Quinine sixty grains, Dried Sulphate of Iron ninety grains. Make into thirty pills, according to the art of the apothecary. Take one pill three, four or five times a day.

Bromide of Potassium, given in doses of from ten to fifteen grains three times a day, sometimes reduces the enlargement of the spleen with wonderful rapidity.

The Iodide of Ammonium and Arsenious Acid, in small doses, frequently repeated, see particularly efficacious in chronic enlargement of the spleen (*ague cake*) with chronic malarial poisoning. Take of Iodide of Ammonium two and a half drams, Iodide of Arsenic one and a half grains, Peppermint Water four ounces. Mix. Take a teaspoonful from three to five times a day. A dram of Fowler's Solution may be substituted for the Iodide of Arsenic.

Brushing the skin over the spleen with Tincture of Iodine, or rubbing it with the Red Iodide of Mercury Ointment, will be of benefit.

Sometimes wearing a Belladonna Plaster, on the left side, will relieve the pain of enlarged spleen.

## HOMOEOPATHIC TREATMENT.

**CHINA** should be administered at the onset of treatment, if no fever of any moment existed from the commencement, particularly if the disease owes its origin to marsh miasm, or if the accompanying fever present an intermittent type, in which case it should be administered during the intervals, if impaired appetite and general derangement be present. Also, if the patient have been weakened by **VOMITING OF BLOOD**, or **DIARRHŒA**. When the *abuse of this medicine, or quinine* has given rise to disease of the spleen, benefit will often be derived from the employment of such of the subjoined remedies as may correspond most closely with the symptoms of the case. The alternation of *China* and *Arsenicum* is appropriate when the symptoms involve a *combination* of the indications afforded for each respectively.

*Dose:* If *singly*, when the disease presents no positive periodical character, and the symptoms are not violent, of a solution of eight globules, to two table-spoonsful of water, give a teaspoonful every two hours, until positive amelioration or change. If the symptoms be very severe, the like dose should be repeated at intervals of one hour. If the disease assume a distinctly periodical character, the like dose should be administered, during the respite, an hour before the anticipated return of the attack. If in *alternation* with *Arsenicum*, dissolve the like quantities of each, separately, and administer, first two doses of the one, at intervals of three hours, then pause nine hours, and proceed with two similar doses of the other, and so on.

**ARSENICUM** is useful where the disease assumes the intermittent type, or is complicated with ague; and further, when the patient complains of a violent, *burning* pain in the region of the spleen, and a constant pulsation at the pit of the stomach, attended with great anxiety; also vomiting of a dark, grumous fluid, watery, or bloody discharge from the bowels, and burning at the posterior passage; *excessive weakness*, and dropsical swelling at the feet. The alternate administration of this medicine with *China*, is sometimes advantageously adopted as above stated (see *China*).

*Dose:* In all respects, whether *singly* or in *alternation* with *China*, as directed for the last-named medicine.

**ARNICA** is indicated by pressing pain in the left side, under the short ribs, causing difficulty of breathing, and when the vomiting of blood is very severe. When external violence has given rise to the disorder, *Arnica* is especially called for.

*Dose:* In ordinary cases, of a solution of six globules to three table-spoonsful of water, give a teaspoonful every three hours, until amelioration or change. But if *vomiting of blood* occur, the like dose should be repeated every hour.

**NUX-VOMICA** is chiefly indicated by the symptoms of deranged digestion, constipation, etc., which remain after the more threatening symptoms are removed, or after the use of Quinine.

*Dose:* Six globules in a teaspoonful of water, at *bed-time*, until amelioration or change.

## **Part Seventh.**

### **DISEASES OF THE KIDNEYS AND BLADDER.**

## **CHAPTER XVI.**

### **DISEASES OF THE KIDNEYS.**

#### **NEPHRITIS.**

##### **INFLAMMATION OF THE KIDNEYS.**

The history of this disease, in individual cases, is in many respects very obscure. It occurs chiefly among middle-aged persons, and among men more frequently than women.

Some of the causes are: Bruises in the region of the kidneys; sharp, or adhering gravel in the kidney; violent colds, employment of various drugs, such as Turpentine, Spanish Fly, Nitre and Savin, whether used internally or externally. Sometimes violent extensive burns. Excessive use of stimulants. Suppression of the "courses." Long lying on the back. Secondly the disease is caused by suppurative inflammations in other organs, also by diseases of the brain and spinal marrow, heart disease, etc.

Nephritis usually sets in, like other acute inflammatory diseases, with a violent chill, which is almost immediately succeeded by the local pains. After they have reached the acme of their intensity, they extend over the whole region of the kidneys, on both sides; they are continuous, of different degrees of acuteness, cannot easily be described according to their nature, they are considerably aggravated by pressure upon the renal region by taking a full breath, or by motion generally, also by lying on the affected side and by the warmth of the bed. They are scarcely ever restricted to the kidneys; on the contrary, following the course of the ureters (little tubes that carry the urine from the kidneys to the bladder) they radiate into the bladder, testicles, and, in the case of females, into the round ligaments and thighs. Sometimes the testicles are found drawn up spasmodically. With the appearance of these pains the urinary secretion diminishes in proportion as the inflammation involves a larger portion of the kidneys, so that the secretion of urine may be entirely suspended. At first the urine is only saturated, sometimes tinged like blood; but it may likewise preserve its normal color, if one kidney is sound and the other does not secrete any urine at all. The general constitutional balance is very much disturbed. The fever is very violent, the pulse hurried and soon becomes small and contracted, the skin is hot and dry, the thirst agonizing. The patients feel sick to the core. Vomiting is a frequent occurrence without the stomach appearing much deranged, for the tongue may be quite clean. At first the bowels are quite constipated, the appetite is gone.

The further course of nephritis corresponds with the changes that

have been indicated. Recovery may take place after the first onset of the disease, without any suppuration having taken place, or by arresting it, the completeness of the recovery being shown most conclusively by the urine resuming its normal quality. On the contrary, if suppuration sets in, the local pain decreases, becomes duller, and more like a painful pressure; the fever, however, increases, frequent chills or shiverings are experienced by the patient, the tongue becomes coated, the stomach is still more disturbed, pus is found in the urine at an early stage of the disease, and there is frequently an admixture of blood. The patient becomes anxious, restless, the pulse is more frequent and smaller. The subsequent phenomena depend upon how far the urinary secretion is suspended. If only one kidney is diseased, or only a small portion of both, there is no material diminution of the quantity of urine secreted; an abscess forms, with the usual phenomena characterizing the suppurative process, the abscess either discharging and recovery taking place, or else renal phthisis (consumption) setting in, with all the symptoms of marasmus (wasting away) gradually following. This last mentioned result may drag along for months, the urine containing pus all the time. Characteristic features of renal phthisis are, a great tendency to malignant affections of the skin and disposition to lie down. In some cases, serious symptoms set in most suddenly when the discharge of urine had been completely suspended from the beginning, and the patients die in a few days. They may likewise set in gradually, so that the disease, by slow degree assumes a typhoid character. The patients sink into a sound sleep, are attacked with a more or less violent delirium, convulsions, and finally die.

The diagnosis of nephritis cannot always be made with perfect certainty, because the symptoms are sometimes very trifling, and, moreover, very little characteristic. In nephritis the bowels are almost always obstinately constipated; if the disease terminates in phthisis, the constipation changes to diarrhoea.

The termination is unfavorable only if the symptoms of poisoning with uræmia become more and more manifest, until they reach the highest degree of intensity. In other respects the disease becomes the more threatening, the more protracted a course it runs, until it finely terminates in phthisis.

#### ALLOPATHIC TREATMENT.

Treatment of inflammation of the kidneys will consist in the use of hot applications to the loins, hot poultices, dry cupping, and other remedies to relieve pain. Mild purgatives, and medicines to act on the skin, and by these means relieve the kidneys. If there is much pain the medicines to act on the skin, should contain Opium as the powder of Ipecacuanha and Opium with Chlorate of Potash, Dovers Powders, the dose of which is ten grains.

The popular objection to Opium in this disease, in sufficient doses to relieve the pain, on account of drying up the secretions is groundless, because it acts freely on the skin, and so is protective against any ill which may result from a diminution of exertion from the kidneys; besides this suspension of the action of the kidneys will enable them to recover from the inflammation the more quickly, from simply the rest. The antiphlo-



gestic effects of Opium, are most important. Notwithstanding the constipating effects of the Opium, there is no difficulty in obtaining copious discharges from the bowels.

Further effects on the skin may be secured by hot bathing, the hot wet pack, and the hot air bath. The hot air bath may be given by burning alcohol in a saucer under the patient, sitting in a cane seated chair, well wrapped, (chair and patient), from the floor up to the neck with blankets.

Jaborandi has especial power of causing the elimination of urea (a poisonous ingredient of urine), by the skin, and is especially indicated in this disease. The dose of the tincture, or fluid extract is half a teaspoonful to a teaspoonful. It may be repeated at such intervals as is required to excite a sufficient degree of sweating.

The bowels may be freely moved with two or three grains of Jalap, and a half a grain of Podophyllum, or a saline cathartic may be given. The amount of purging and sweating required will be proportioned to the decrease in the natural flow of urine. Nothing more than water, given to increase its flow. Ice may be given in small lumps, and swallowed, or allowed to melt in the mouth, if there is a sickness at the stomach.

In the early stages the diet should be light, but solid food is to be allowed as early and as freely as there is power to digest and assimilate it. If suppuration should occur, great attention must be given to sustaining the strength of the patient, and nourishment of milk, cream, raw eggs, beaten up with sugar and water or milk, strong beef tea, juice of meats and aniseed essence, freely and regularly given.

The difficulty of discriminating this disease and its various conditions, together with its serious nature, dictate that its control should be placed wholly in the hands of a skillful physician.

### HOMEOPATHIC TREATMENT.

CANTHARIDES will be found most efficacious in the treatment, and may be taken, at the very commencement of the attack, even when the accompanying fever is considerable, particularly when the urine passes off in drops, or is tinged with blood; or when it is exceedingly painful to pass water, with burning pain in the urinary canal; and when there are the general symptoms of shooting, cutting, and tearing pains in the loins and regions of the kidneys; or even in cases of complete suppression of urine.

*Dose:* Of a solution of eight globules to two tablespoonsful of water, give a teaspoonful every three hours, until positive change.

NUX-VOMICA is appropriate when the affection can be traced to excess of wine or stimulants, and sedentary habits; and where we find constipation, feeling of faintness, nausea, vomiting, distention of the stomach, and drawing up of the testis and of the spermatic cord.

*Dose:* As for Cantharis.

BELLADONNA.—When shooting pains in the kidneys are present, extending to the bladder—and further, when inflammation in the kidneys is accompanied with colic and spasms of the stomach, heat in the region of the kidneys, scanty flow of water of an orange-yellow, or sometimes of

a bright-red color, depositing red or whitish thick sediment; anxiety, restlessness, and periodical aggravation.

*Dose:* As for Cantharis.

HEPAR-SULPHURIS is useful, when we have reason to apprehend the formation of an abscess or the commencement of suppuration. The non-professional prescriber must be careful not to mistake the apparent alleviation of suffering here for the subjugation of the disease, as the distinction is difficult. The following symptoms may serve as a guide in these serious cases; cessation of the acute pain, a sensation of throbbing and a feeling of weight in the region of the kidneys, alternate chills and slight flushes of heat, and copious perspiration are sure signs of pus forming.

*Dose:* A powder or eight pills dissolved, to be taken like Canth.

#### INFLAMMATION OF THE KIDNEYS OCCASIONED BY MECHANICAL INJURIES.

ARNICA is appropriate for the treatment of Inflammation of the Kidneys resulting from mechanical injuries (such as contusions or severe concussions), and should be employed at the onset of treatment, whatever be the course afterwards indicated by the subsequent development of symptoms.

#### ILL-EFFECTS FROM ABUSE OF CANTHARIDES.

The mischievous use of Cantharides in the application of blisters, whereby the kidneys often become considerably and even seriously affected, is promptly and effectively counteracted by the Homœopathic antidote employed internally and externally.

CAMPHOR (*Concentrated Tincture*) should be administered without delay, when an affection of this kind is distinctly traced to the cause in question.

*Dose (internal):* One drop of the concentrated Tincture of Camphor on a small lump of sugar, every hour, until three doses have been given; and afterwards, every two hours, until the symptoms subside.

*Application (external):* Moisten the palm of the hand with a few drops of the concentrated tincture, and apply with friction on the inner side of each thigh.

#### INFLAMMATION OF THE KIDNEYS ASSOCIATED WITH GRAVEL.

This disease sometimes arises from the presence of stone in the kidneys; in which case the symptoms of fever do not occur, until a considerable time after acute pain has been experienced. Further, a numbness of the thigh, and a retraction of the testicle of the affected side are considered as distinguishing marks of the existence of a concretion in the kidney or urinary duct. See Gravel page 450.

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#### BRIGHT'S DISEASE—ALLOPATHIC TREATMENT.

Treatment of acute Bright's disease (acute inflammatory dropsy) will have reference, in the first place, to combatting the inflammation of the

kidneys. Upon the early recognition of the disease may depend largely the success of treatment.

The patient should be kept warm in bed. Hot fomentations should be applied over the loins, by means of wet cloths covered with oiled muslin and several thicknesses of flannel. Dry cupping should be applied, over the loins, as the best method of revulsion. If the patient is strong and robust, wet cupping (blood-letting by cupping) will be of the highest possible service. General bleeding is sometimes necessary in the very robust, but should never be employed, if the patient is in any way enfeebled, as when the disease occurs after scarlet fever, and in persons given to intemperance. Saline laxatives are valuable, both by way of revulsion and eliminating poisonous material from the blood, and so relieving the kidneys, as Epsom Salts, Seidlitz Powders, or ten grains of Jalap, or two or three grains of the extract with a tablespoonful of Rochelle Salts, or Cream of Tartar.

Opium, as a rule, ought not to be given in this disease, on account of diminishing the secretions, including those of the kidneys, which ought to be permitted to act naturally.

Belladonna, in doses of ten or fifteen drops of the Tincture, twice a day, or sufficiently often to produce a slight dryness of the throat, is said to be serviceable in this disease.

The diet should be light. The drinks should be confined to water, barley-water, flaxseed tea, and other nourishing drinks, which may be given as freely as the patient desires.

Medicines, to act on the kidneys (diuretics) ought not to be given in the early stage of the disease, because their action may increase inflammation.

The dropsy is not dangerous, unless it invades the pleural cavity (cavity of the sac lining the chest and covering the lung), or the lung cells. This will be shown by the marked dyspnœa (difficulty of breathing, or short breath). As the danger is from uræmia (blood poisoning from urea, an ingredient of the urine, remaining in the blood), it is fortunate that remedies which will cause the elimination of urea from the blood, also diminishes the dropsy. This is done through the skin and bowels, the former by measures which produce sweating (diaphoretics) and the latter by remedies which produce free watery discharges from the bowels (hydrogogue cathartics).

Hydrogogue cathartics are by far the most efficient. They are called for in proportion to the amount and location of the dropsy, and the danger from blood-poisoning. When the dropsy invades the pleura or lungs, and the shortness of breath is marked, relief may be had in a few hours by giving Elaterium in doses of an eighth to a quarter of a grain, two or three hours apart, until free cathartic is produced. It may be given with a grain of Extract of Hyoscyamus, or a teaspoonful or two of the Tincture and a grain of Pulverized Capsicum. Elaterium must be used with caution on account of its prostrating effects. It is scarcely safe for weak subjects, but may be a necessity.

Croton Oil may be given in doses of a drop, repeated at the same intervals. The hot air bath may be used alternately with these active cathartics.

The decrease of the amount of urine passed, and its low specific gravity shows that urea is not eliminated by the kidneys in sufficient quantities, and measures should be at once resorted to, to compensate for that deficiency. The most reliable means at our hands for this purpose, are the watery stool producing (hydrogogue) cathartics and copious sweating by means of the hot air bath.

In case of insensibility, or convulsions from blood-poisoning by urea, Elaterium should be given in doses of a quarter or half a grain mixed with butter and placed well back on the tongue. The hot air bath should be used simultaneously.

The hot air bath may be easily given by conveying hot air from an alcohol lamp through a sheet iron pipe under the bedclothes. The part of the pipe which rests under the clothes may be closed in a tin box for convenience. Rouchette, of New York, devised a very simple apparatus for this purpose, called Rouchette's hot air bath.

The elimination of urea by the skin will be greatly facilitated by the use of Jaborandi. Half a teaspoonful to a teaspoonful of the tincture or Fluid Extract may be given three or four times in the twenty-four hours. A very eligible remedy as a diaphoretic is Solution of the Acetate of Ammonia in doses of a tablespoonful three times a day.

If the symptoms are not very urgent, the use of the saline cathartics recommended in the first part of this article, are to be used instead of these most powerful ones just spoken of.

The daily use of the hot air bath may be continued, during the disease as the most efficient means of producing elimination by the skin. If the effect of the bath is agreeable, its application may be continued from half an hour to an hour each time, or if too depressing, it may be used for a shorter time, at more frequent intervals.

When the flow of urine begins naturally to increase the use of diuretics (medicines which cause a flow of urine), may be cautiously began, and the other evacuates omitted, beginning with the cathartics. Among the eligible diuretics for this purpose, are Cream of Tartar (Bitartrate of Potash), which may be drank at will in lemonade, made of a clear solution of Cream of Tartar dissolved in hot water. Digitalis in doses of ten drops of the tincture three times a day, gradually increased until the desired effect is produced, or Broom (Scorpius), in a tea, or half teaspoonful doses of the fluid extract three times a day.

During convalescence attention should be given to the diet, that the food is nourishing, and well digested containing tender meat, milk, and eggs. As the patient leaves the room he should be clothed in flannel, and properly protected against cold. Generally, the Tincture Muriate of Iron should be given in doses of ten to twenty drops, largely diluted in sweetened water, after eating. Tonics of one or two grains of Quinine, or a couple of ounces of some of the simple bitter teas as Columbo, Quassia, Gentian, etc., may be taken with benefit before meals.

**CHRONIC BRIGHT'S DISEASE.**—It is to be understood, in the first place, that this disease is incurable. Life is greatly prolonged by judicious management.

The indications are related to the dropsy and the uræmia (poisoning by that ingredient of the urine known as urea remaining in the blood.)



General dropsy calls for the same treatment as is directed in the acute disease. It is better, however, to use the saline cathartics or Sulphate of Magnesia (Epsom Salts.) Citrate of Magnesia, Rochelle Salts or Seidlitz powder, if the dropsy be moderate, but if the dropsy be great, the more powerful hydrogogue (water-producing) cathartics may be used, as, Elaterium, Croton Oil, or Bitartrate of Potash (Cream of Tartar) and Jalap, as directed in the acute disease. One free watery stool may be produced daily. Care should be exercised not to weaken the patient by pushing cathartics too far.

Remedies to act on the kidneys (Diuretics) may be used in the chronic form of the disease, without risk of harm. Pure water may be drunk in large quantities. Of the diuretic medicines, the Cream of Tartar, Citrate or Acetate of Potash, are to be preferred. They may be used in connection with the vegetable diuretics Digitalis, Squills, or Broom.

The potash may be readily taken prepared as follows: Take of Cream of Tartar an ounce, dissolve in hot water; when cold pour off the clear, supernatant liquid, cut up some lemons into it, and sweeten to the taste. The whole of this Cream of Tartar lemonade is to be taken during the day.

Take of the Citrate of Potash and Bicarbonate of Potash each four ounces, dissolve in a pint of soft water. Of this solution two tablepoonsful may be put in a large tumbler half full of water, sweetened to the taste, add a large tablespoonful of lemon juice and drink while effervescing, six times a day. In the absence of lemons, a tablespoonful of a solution of three drams of Citric Acid in half a pint of water, may be used instead.

Of the vegetable diuretics Digitalis is to be preferred, given in infusion, (tea) two drams of leaves to the pint of water, in doses of one or two tablepoonsful. Broom in decoction (tea boiled), one ounce of broom top to the pint, in the same doses.

The tinctures of Digitalis and Squill, the Fluid Extract of Broom may be used in doses of half a teaspoonful to a teaspoonful.

When the stomach or bowels will not permit giving diuretics, cloths may be soaked in an infusion of Digitalis made with an ounce of the leaves in a pint and a quarter of water, and laid over the abdomen. Or the body may be rubbed for a time with a liniment made with equal parts of the Tinctures of Digitalis, Squill, and Iodine.

Medicines which produce sweating (diaphoretics) must be depended on, if hydrogogue cathartics are not well borne, and the kidneys do not act freely with the use of diuretics. Indeed, it seems preferable to use diaphoretic measures alternately with the action of cathartics. Or rather use diaphoretic measures regularly and resort to cathartics to cause a greater elimination of water and urea. The first and best means at our disposal for this purpose is the hot air bath, as described in the treatment for inflammation of the kidneys, and in the treatment of acute Bright's disease. In short, the benefit from the hot air bath is so great, and it acts so nicely, that I am disposed to recommend its use to the exclusion of every other means. Jaborandi and Solution of the Acetate of Ammonia are appropriate, used as recommended in the treatment of acute Bright's disease.

The measures for the elimination of urea, are the same as given for that purpose in the acute form of the disease, namely: reliance, when the symptoms are urgent, or the use of the hot air bath, and the hydrogogue action of Elaterium, especially when the urea has produced conea insensibility, or convulsions. When this urgency does not exist, it is best to avoid the use of Elaterium, but recourse may be had to the milder cathartics, directed for the mitigation of the dropsy.

The tonic effect of Quinine and Iron, are markedly useful in this disease. The former may be given in doses of two or three grains three times a day. The form of Iron to be preferred is the Muriate Tincture of Iron. It should be given in doses of twenty or thirty drops, largely diluted in sweetened water, three times a day. A change in the form of these tonics from time to time, is advantageous. Pills of a twentieth to a thirtieth of a grain, give one three times a day, appears to be of great advantage in chronic Bright's disease.

Food should be nutritious, and as abundant as the digestion will admit of. The clothing should be warm and the patient should lead an out door life to such a degree as his strength will warrant.

For the relief of pain, Opium should be avoided, if possible, and Belladonna, Hyoscyamus, Indian Hemp, Aconite, Conium, etc., used instead. When these fail to give relief, recourse may be had cautiously to Opium. It has acted admirably in some cases.

Vomiting and purging are to be regarded as conservative, only they are nature's means for eliminating urea. They should be restrained only sufficiently to keep them within the bounds of safety. They may be relieved by aiding in throwing off the urea, by resorting to the hot air bath. Medicines calculated to relieve vomiting are Oxolate of Cenum in doses of five grains. Dilute Hydrocyanic Acid in doses of three to five drops, Creosote, in doses of one drop in water, Bismuth, in doses of ten to twenty grains, and lumps of it swallowed whole or allowed to dissolve in the mouth.

If any remedies are necessary for diarrhœa use Astnie-Gentes, directed for the treatment of that trouble are appropriate.

Upon the early recognition of the disease, and the promptness with which its effects are met, will depend the benefit of treatment. The disease may be stayed, and in some cases life may continue with comfortable health for years.

Gallic Acid appears to have the power of preventing the waste of albumen. It should be given in doses of five to fifteen grains in solution with five or six drops of Aromatic Sulphuric Acid. The following is the formula of Dr. Aitken: Take of Gallic Acid, from one to two drams, Dilute Sulphuric Acid, one dram, Tincture Snpulus (the yellow powder shaken from hops) a dram. Infusion of Hops six ounces, mix, dose a tablespoonful three times a day.

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## GRAVEL.

### RENAL CALCULI.

The formation of gravel in the kidneys is a common occurrence, but frequently remains unnoticed, because no unpleasant symptoms are

caused by them. In most cases, the causes of this affection are obscure or very uncertain.

While the gravel (calculi) are generally met with in rather fleshy persons who live mostly on animal food, yet they do, also, occur in weakly persons who use a very spare diet. Without doubt the mode of living is the cause of the concretions (gravel), although a peculiar disposition of body must exist which, is as yet unknown to us. The urinary concretions in the kidneys vary; at times they form a fine sandy deposit, gravel; at other times larger bodies, whose shapes vary according to their locality and their place of origin; they may even be large enough to fill the cavity of the kidney. Their surface is at times smooth, at others rough; the number of calculi contained in one kidney is very indefinite; sometimes their sides, where they had been in contact with other calculi, form regular facets.

The symptoms caused by renal calculi, are very important, because they frequently attain a great height, and have the appearance of great danger, as though life itself were imperilled by them.

Gravel may exist without any morbid symptoms; in other cases, the passage, and perhaps the formation of gravel are attended with marked derangements of the functions of the stomach, the main feature of which, generally, is an excess of acidity. We have pointed out this connection when speaking of chronic catarrh of the stomach. Even larger calculi may exist and be passed without any pain. This depends upon the size of the calculus, its smoothness, roughness, or the angularity of its form, upon the width of the ureters, upon the sensitiveness of the urinary passages to the foreign body, whether and what severe disturbances the passage of the calculus occasions. These symptoms together, are generally designated by the name of renal colic. It should be observed, however, that other obstacles to the excretion of urine, such as the presence of bloody coagula in renal hemorrhage, may cause renal colic, except that such colic is usually less persistent, violent, and distressing; for the reason that the obstruction is not fixed, and does not irritate or wound the mucuous membrane.

Renal colic generally breaks out suddenly, after a severe effort or concussion; its gradual development form indefinite pains in the renal region, whence they spread to adjoining parts, is of less frequent occurrence; the former generally takes place if the pains announce the entrance of a renal calculus into the ureter; the latter, if the pain is occasioned by a gradual irritation of the renal pelvis, or by a change in the position of the concretion. The pains, generally, are very violent, are felt in the region of the affected kidney, whence they spread to the bladder and the thigh, and, when excessive, generally affect the whole side. The patients suffer a great deal, are tortured by an agonizing anxiety, and have no rest in any position or place. Their face is, at times, pale as death, at others bright-red; the body is cool, the pulse small and frequent. If the parts are very sensitive, convulsive symptoms are apt to set in. The passage of urine is impeded and painful, sometimes the strangury is complete. The pains, sometimes, continue gradually to increase, until the abdomen shrinks from the least touch, or else they remain unchanged, or they remit at intervals until they finally cease en-

tirely, and the patient again enjoys perfect health. In such cases, the concretions usually pass off, soon after, with the urine. If the calculus has not passed, the pain may continue and nephritis result in consequence. The passage through the ureter, which, after the intense pain has somewhat abated, the patient is able to watch and point out as the calculus progresses, lasts from a few hours to several days.

The diagnosis of renal colic is not always very easy. The most common characteristic indications of the disease are: the fixed starting-point of the pain, together with the urinary difficulties. The prognosis is unfavorable only, if the concretions remain in the kidney and cause a dangerous irritation in this organ. An arrest of the calculus in the ureter is a rare exception.

### ALLOPATHIC TREATMENT.

GRAVEL OR RENAL CALCULUS.—The relief of pain in a "fit of gravel" (Nephritic Colic) is the first thing called for. The most reliable means of relief is the hypodermic injection of a quarter of a grain of the Sulphate of Atropine every fifteen or twenty minutes until relief is obtained, by the hands of a physician. In case relief is not soon given, recourse in severe cases may be had to the inhalation of chloroform.

The passage of the gravel may be hastened by freely drinking water, which increases the secretion of urine; this will carry the gravel before it into the bladder.

The most common variety of gravel is uric acid. This ingredient of the urine is very insoluble and precipitates from the urine in the pelvis of the kidneys. The passage of this gravel causes pain. When gravel of this kind is passed in the urine into a vessel, it is known by its red color. The urine is almost always acid when voided. The preventive treatment of this condition consists in rendering the uric acid soluble by the use of the vegetable salts of potash, as the Citrate and Bitartrate of Potash. The Bicarbonate of Potash is also appropriate. The uric acid unites with the Potash and forms the Soluble Urate of Potash. Cream of Tartar lemonade may be made by the directions given in the treatment of Chronic Bright's Disease and drunk as freely as is agreeable to the patient. Or Citrate and Bicarbonate of Potash may be used, also as there directed, as freely as is desired.

Carbonate of Lithium should be given two or three times a day in doses of five grains. It may be taken in either of the potash solutions.

Soda is inappropriate in this condition as with Uric Acid; it forms a hard insoluble salt.

Alcoholic drinks, wine and beer, ought to be omitted. The diet should be plain and simple but nutritious. An active life in the open air is beneficial.

Sometimes the gravel is composed of Phosphate Salts; then the gravel, if voided in the urine, they are of a grayish or white color. The urine is generally alkaline.

The use of Dilute Nitro-Muriatic Acid in doses of ten to twenty drops diluted with sweetened water until pleasant, should be taken three times a day.



Bengoate of Ammonia has the power of dissolving the Phosphate calculi. It may be given in doses of ten to twenty or thirty grains, two or three times a day.

The diet should be generous, both in quality and quantity.

There should be nervous and mental rest. Tonics of bark and iron are useful.

The gravel may be composed of Oxalate of Lime. In that case the color of the gravel, if voided is dark, brown or yellow. Its prevention will consist mainly in the use of Dilute Nitro-Muriatic Acid twenty or thirty drops in a glass of water three times a day. The use of sweets and especially the rhubarb or pie-plant ought to be disallowed.

A calculus may be more easily discharged from the bladder, if the urine is retained for a long time, or the bladder may be washed out through an open mouthed catheter.

Stone in the bladder nearly always begins with the presence of a calculus (gravel.)

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## CHAPTER XVII

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### DISEASES OF THE BLADDER.

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#### CYSTITIS, INFLAMMATION OF THE BLADDER.

Inflammation of the bladder, in most cases, involves the mucus lining of the bladder, and as such is called Catarrhal Cystitis.

The most frequent causes of cystitis are irritations affecting the mucus lining of the bladder directly; they are either mechanical: catheterism, injections into the bladder, stone, or medicinal: acrid diuretics, Cantharides, Copaiva, Cubebs, or even the decomposing urine itself. In other cases the disease may occur as a complication; inflammatory disturbances of adjoining organs may spread to the bladder, or the cystitis may simply be symptomatic of some acute general affection. In rare cases only a cold alone will be sufficient to cause an inflammation of the bladder.

The symptoms of acute cystitis vary. The local symptoms may amount to no more than a slight feeling of pressure in the region of the bladder, and are scarcely ever as intense as Hartmann describes them. Amid more or less febrile motions, the patient always experiences at first a pain when urinating. When the attack first sets in, a larger quantity of urine is voided with painful urging; soon, however, the urine is voided only in drops, and amid the most agonizing pains, as though burning embers were passing through the urethra. This symptom is most strikingly witnessed in the most acute form of cystitis after the use of new beer; it is characteristic of this inflammation. Very soon the difficulty of urinating becomes associated with a constant pain in the region of the bladder; it is

a cutting or stitching pain, and is aggravated by motion, urging to stool coughing, sneezing, pressure from without; it spreads upwards and downwards to the penis, perinæum, and thigh. At the outset of the disease the urine is clear; after a while it becomes slightly tinged with blood, and, in the further course of the disease, mixed with flocks of mucus and pus-corpuscles, turbid, inclined to decomposition. The general health is not always disturbed correspondingly to the abnormal sensations proceeding from the bladder; at the commencement of the disease the general health is not much impaired, and it is only at a latter period that restlessness, chills, loss of appetite, and even vomiting set in.

The disease very frequently runs such a rapid course, that an improvement and even complete recovery may take place in a few days. If the disease increases in intensity, the tenesmus of the bladder may increase to complete retention, the bladder becomes extremely distended, and threatening symptoms of prostration set in, which may end in death. Usually, however, the disease, unless recovery takes place, assumes a lentescent character, and becomes chronic.

In the chronic form the pains decrease considerably, only the constant urging remains. The mucus is secreted in considerable quantity, and along with it pus, so that the urine has a marked white-yellow appearance, sometimes like milk, and deposits a very tenacious mucus sediment. The tendency to decomposition is very great, the reaction decidedly alkaline, less frequently neutral. However, the urine is decomposed only, if it remains for a long time in the bladder. Unless peculiar circumstances hasten the loss of strength, it generally takes place very slowly, and the disease may continue for years before death takes place from exhaustion. Complete recovery is a rare event. Among the sequelæ, we distinguish ulceration of the mucus membrane, hypertrophy of the walls of the bladder, paralysis of the detrusor muscle; it is particularly the two first-named sequelæ that hasten the fatal termination of the disorder, by causing hectic fever and a real phthisis of the bladder.

What we have said shows that the prognosis is quite uncertain. Even if we usually succeed in overcoming an acute catarrh of the bladder, yet ailments sometimes remain for a long time after the slightest attacks, to which the careless or improper conduct of the patient may impart a high degree of gravity. Chronic catarrh of the bladder is always a dangerous disorder, whenever a great deal of mucus and pus is secreted.

#### HOMEOPATHIC TREATMENT.

This malady, like the previous one, ought only to be treated by non-professional persons when medical aid is not at hand.

ACONTUM is ever requisite in the initiatory treatment of this disease, if there be a considerable degree of fever, with hot, dry skin, and quick, hard pulse.

*Dose:* Dissolve ten pills in two tablespoonsful of water, and give a teaspoonful of the solution every two hours, until the pulse becomes more healthy, and the skin moist, etc. After which consult the indications for the following medicines respectively, wherewith to continue treatment.

**CANTHARIDES\*** is as valuable a remedy in the treatment of Inflammation of the Bladder as in that of the Kidneys, and will, in the greater number of cases, be required to follow the initiatory administration of *Aconitum* (or even to precede the latter when the fever has not run so high.)

*Dose:* Dissolve eight globules in two tablespoonsful of water, and give a teaspoonful of the solution every three hours, until change.

**NUX-VOMICA.**—When the affection is attributable to an indulgence in wine and spirituous liquors this remedy, timely administered, will, in many instances, check its further progress; and also, when it results from suppressed piles, or other habitual discharges, or from dyspeptic derangements.

*Dose:* As for Canth.

**PULSATILLA.**—Valuable in checking the development of the affection when arising from suppressed menstruation.

*Pulsatilla* is also serviceable in all cases, from whatever cause arising, when occurring in individuals of phlegmatic temperament, with the following symptoms: frequent desire to urinate, painful and scanty emission of water, either slimy or tinged with blood, which deposits a purulent-looking sediment; burning and cutting pains in the lower part of the belly, with external heat and tumefaction; suppression of urine.

*Dose:* Six pills in a teaspoonful of water, every six hours, until amelioration or change.

**HELLEBORUS-NIG., VERATRUM.**—These medicines are of considerable service in cases of inflammation of the bladder which come on gradually, but subsequently become very severe, attended with frequent urging to pass water, and spasmodic pains, during which only a small quantity of water is passed; to these symptoms are added continual inclination to vomit, aversion to all kinds of food, excessive distention of the belly.

*Dose:* Of either of these remedies as selected, give three globules in a teaspoonful of water, every two hours, until three doses have been given, and then every six hours, until positive amelioration or change.

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## HEMATURIA, BLOODY URINE.

Bloody urine, proceeding from the bladder, originates most commonly in injuries of the mucous membrane of the bladder by foreign bodies, or by concretions. Moreover, hematuria and malignant growths in the bladder may arise from inflammation of the bladder and its consequences, ulcerations and dilatation of the vessels. It is seldom the case that hemorrhage from the bladder occurs without any, evidently, material cause. As in the kidneys, so in the bladder, certain poisons may cause hemorrhage, though, in the latter, less frequently than in the former.

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\* When an affection of the bladder has been induced by the local application of *Cantharides*, in the form of a plaster, the tincture of *Camphor* should be employed as an antidote, in the manner described at page 95.

Excepting the symptoms of the casual affection, the symptoms of hematuria are generally trifling, determined, for the most part, by the coagula that form very readily and interfere with the easy flow of urine. Hence, we have urging, tenesmus, spasm of the bladder, burning or cutting pains, and very frequently a perfect absence of pain. The symptoms are always restricted to the bladder, and do not involve the kidneys in any way. As a rule, the blood is not intimately mixed with the urine, is not decomposed, and, if the hemorrhage is at all considerable, the blood coagulates in such quantity that the catheter is often required in order to effect a passage for the urine. The flow of blood from the bladder very easily exceeds the quantity flowing from the kidneys, and hence superinduces, more readily, the phenomena entailed by loss of blood. On the other hand, an hemorrhage from the bladder usually has a shorter duration than hemorrhage from the kidneys, and scarcely ever lasts uninterruptedly for weeks. Of itself, it is scarcely ever an accident of any great importance.

#### ALLOPATHIC TREATMENT.

In the treatment of bloody urine we ought to discriminate between hemorrhage from the bladder and from the kidneys. In hemorrhage from the kidney the blood is more evenly mixed through the urine, and fibrine is apt to be discharged in long strings which have been moulded in the ureter (the tubes leading from the kidneys to the bladder). In hemorrhage from the bladder, the blood is apt to be passed with the very last of the urine voided.

Internally, the remedies to be resorted to are the following: The Tincture Muriate of Iron, which should be given in doses of twenty or thirty drops largely diluted in sweetened water; Gallic Acid may be given with Ergot, the former in doses of ten to fifteen grains, with five or six drops of Aromatic Sulphuric Acid, in water, and the latter in doses of a teaspoonful of the Fluid Extract, four times a day, or oftener. In this, as in other forms of hemorrhagic disease, a useful formula is: Take of Gallic Acid a dram, Ergotine and Digitalis, each, a scruple. Make into twenty pills. Take one every four hours.

Turpentine is also a useful and available remedy. It may be given in the following mixture: Take of Oil of Turpentine three drams, Fluid Extract of Digitalis a dram, Mucilage of Gum Arabic half an ounce, Glycerine two ounces, Water an ounce, Oil of Gautheria half a dram. Mix. Dose: A dessertspoonful every three hours.

Should the disease be periodical, ten drams of Quinine once or twice a day will prove the best remedy.

The Tincture Muriate should be given alternately with any of the other plans of treatment given.

In case the hemorrhage is from the bladder, it is best to wash out that organ by injecting into it a solution of Tannin, or Alum, or both, strong enough to have a styptic taste.

When the hemorrhage is from the kidneys, hot air baths and purgatives are called for, as directed in the chapter on Diseases of the Kidneys.

Drink should be simple, as plain water, barley-water, etc., which may be taken freely.



## HOMCEOPATHIC TREATMENT.

The best remedies for hemorrhage from the urinary organs are :

**ARNICA.** When caused by gravel in the bladder, injury from external causes, like a fall or blow. Especially, if caused by the awkward or ignorant use of the catheter.

*Dose:* Six pills every two to four hours.

**CANNABIS.** The flow of blood is accompanied by retention of urine or at least by painful urination, burning, lancinating, sharp pains during the emission of urine, *fine* where the blood comes from the urethra also.

*Dose:* As for Arnica.

**CANTHARIS.** Is only *good* where there is much pain of a violent cutting, pressing and crampy character, extending into the urethra, and, also, into the kidneys. Pain *increased* by drinking water.

*Dose:* As for Arnica.

**NUX-VOM.** If the difficulty is caused by the abuse of spirits, by suppressed menses, etc.

*Dose:* As for Arnica.

**SASSAFRAS** tea or a few drops of Oil of Sassafras on a lump of sugar, taken three times a day, is a sovereign remedy. The *Oil* is best. Take it for two days only.

**WITCH HAZEL.** In any form, as a tea (home-made), Pond's Extract, Humphrey's Extract, or any of the standard extracts of this remedy may be relied on as very good indeed, in all cases of this kind, as well as in many other forms of excessive bleeding.

**IPECACUANHA.** Is reliable where there is profuse loss of blood, with cutting in the abdomen and urethra, faintness, deadly paleness, sickness at the stomach, oppression of the chest, and a feeling of warmth in the lower abdomen.

*Dose:* As for Arnica.

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**ENURESIS NOCTURNA. WETTING THE BED.**

This inconvenience would be of little consequence, except for the crying abuses to which the endeavor to remove it has led. Physicians as well as parents have supposed that this weakness could be done away with by purely educational means, which were, moreover suggested by the most insane views regarding its causes. Laterly, physicians have improved their methods of meeting this accident; lay-persons, however, are still true to their absurd prejudices in this respect.

Wetting the bed is an accident to which children are liable; it seldom lasts beyond the age of pubescence, still less beyond the age of twenty years. Healthy individuals scarcely ever wet their beds more than once. This trouble generally dates from the earliest infancy, and rarely makes its appearance at a later period. Various causes have been assigned for it, and corresponding methods of treatment devised for its cure, however, with varied results. Laziness may give rise to it in many cases, but more frequently it is the fear of getting up in the dark. A common cause of the

trouble is, that children sleep too soundly to be roused from their sleep by the irritating action of the urine upon the bladder. Yet the bladder need not be weak or paralyzed; if so, the accident may take place even during a light sleep. The children generally say that they dreamed of wetting the bed, showing that the irritation was not sufficiently powerful to wake them. The quality of the urine may cause a passing attack of enuresis; we see this in children who are liable to catarrhal attacks, and, under such circumstances, immediately void a saturated urine. The irritation caused by pin-worms may likewise induce enuresis.

Corporeal punishment should never be resorted to as a means of curing this weakness, which is rather made worse by it than otherwise; older children are made so nervous by this treatment, that they sometimes remain wide awake half the night. On the contrary, their sense of honor and will should be appealed to. It is of no use to keep the ordinary beverage from them in the evening; this may cover up the weakness for a time, which returns again as soon as a little more liquid is again partaken of. Nor is it of any more use to frequently rouse children from their sleep at night. If no abnormal conditions forbid, the best plan is to gradually accustom the bladder to hold larger quantities of liquid. Children should be accustomed during the day to retain the urine as long as may seem proper, and not to yield to the least desire to urinate, as is their usual custom. This system, if carried out consistently and vigorously, is often alone sufficient, in otherwise normal cases, to effect a cure, of course not in a few days. By measuring the quantity of urine at every discharge, we can determine *a priori* the time when the enuresis will cease. The more the quantity increases the nearer we are to a cure. This method has the advantage of being readily adopted by the children, provided they are promised a speedy delivery from their trouble.

#### ALLOPATHIC TREATMENT.

The involuntary flow of urine during sleep so frequently met with in young children, may result from any of the causes of incontinence. The character of the urine is to be examined in all cases. If it is alkaline when first voided Dilute Nitro-Muriatic Acid should be given in doses of from five to twenty drops, in from a quarter to half a glass of sweetened water, three or more times a day, to cause an acid reaction of the urine. If the patient is weakly, ten drops of the Tincture Muriate of Iron should be given in the same way as the acid, after each meal. Should the urine be exceedingly acid when first voided, alkalies ought to be given. A drink of Cream of Tartar Lemonade may be used.

Take from two to four teaspoonsful of Cream of Tartar, dissolve in hot water; when cold pour off the clear liquid, cut some lemons into it and sweeten. Drink as desired. The patient ought to be made to drink sparingly of water or other fluids during the latter part of the day. During the night he should sleep on the side. He ought to be wakened if he turn on his back.

There is no remedy which so positively overcomes the irritability of the bladder as Belladonna. Take of Sulphate of Atropine one grain, dissolve in one ounce of distilled water. Give five drops at bed-time and increase the dose by two drops each night until the incontinence ceases or

marked dryness of the throat, or dilation of the pupil is produced. The Tincture of Belladonna may be used for the same purpose in doses of five drops. The ratio of increase of the Tincture may be five drops, until the same results are produced. If the trouble does not cease under the use of the Belladonna alone, the Tincture of Nux Vomica may be given in doses of three drops three times a day, to a child of three to five years old. If the child is five years old or over, five drops may be given. Ergot is often efficacious in this disease, twenty to thirty drops of the fluid Extract may be given in water two or three times a day.

Iodide of Iron is often especially serviceable in this trouble. It seems adapted to cases of weak, pale, scrofulous children. The Syrup of the Iodide of Iron may be given in doses of twenty drops, largely diluted in water, three times a day. If it is used it is not necessary to use the Muriatric Tincture.

If these means fail, it is best to awaken the patient once or twice in the night to empty. A large ball or something of the kind may be tied to the back of the patient, which will awaken him if he turns upon his back, when he may arise and empty his bladder.

It is claimed that the trouble is caused in some boys by a long prepuce having a very small opening, giving rise to irritability of the bladder. That in that case drugs are useless but circumcision removes the difficulty.

#### HOMOEOPATHIC TREATMENT.

Where, in spite of every precaution on the part of the nurse, children wet the bed every night, and no other symptom of derangement can be detected, the following remedies are often effectual in surmounting the weakness.

LEXIN is to be prepared, when the mishap generally occurs during the first sleep.

*Dose:* Six pills in a teaspoonful of water at bed time, for four nights in succession; then pause four days and resume the administration, if necessary, on alternate days, four times and so on.

ACIDUM PHOSPHORICUM will prove useful in some cases when large quantities of urine are emitted, so that the child's bed is "flooded" nightly.

*Dose:* As for *Sepia*.

BELLADONNA is appropriate in cases in which the weakness is evidently incidental to a relaxed condition of the bladder, or to cerebral irritation.

*Dose:* Four pills in a teaspoonful of water, repeated, if necessary, every day.

SULPHUR should be perseveringly employed in almost all chronic cases occurring in delicate children, but particularly in those who are, or have been, subject to eruptions on the skin.

*Dose:* As directed for *Sepia*.

CINA is a useful remedy when the existence of worms appears to be the irritating cause.

*Dose:* Eight pills, as directed for *Sepia*.

## CYSTOSPASMUS. SPASM OF THE BLADDER.

This spasm is a symptom in many affections of the urinary organs, and, as such, is not referred to in this place. There is no doubt that it may likewise represent a pure nervous condition of the bladder, although its occurrence as such is comparatively rare.

The disease may break out at any age, but is most frequent in middle-aged individuals of the male sex. All persons with weak and irritable nerves are predisposed to this affection, hence it is most frequently met with among hypochondriac and hysteric individuals. Hence, a sudden emotion, an outburst of passion, great depression of strength, violent exertions during sexual intercourse, onanism, may be proximate causes of the disease. Whether a simple spasm of the bladder may be caused by a cold, is questionable.

A spasm of the bladder commonly sets in quite suddenly, (the patient being otherwise in the enjoyment of good health), as a violent, constrictive pain, proceeding from the neck of the bladder, and extending along the under side of the penis towards the glans and attended with partial or complete erection, sometimes radiating to the groin, testes, thighs, and very often, at the same time, along the perinæum towards the anus, accompanied by a pain resembling tenesmus. If the spasm affects the detrusor muscle (the muscle that forces the urine from the bladder) alone, the least accumulation of urine excites a violent desire to void it, so that the patients are sometimes unable to prevent the flow of urine; if the sphincter (the muscle that retains the urine in the bladder) is affected, the urine is either voided drop by drop or cannot be voided at all; if the detrusor and sphincter are affected at the same time, we have the most violent urging to urinate, attended with a more or less complete inability to void the urine; this last-mentioned case is most apt to cause nervous phenomena of a different kind, such as anguish, restlessness, trembling, convulsions, violent tenesmus. An attack of spasm may last from one or more minutes to half an hour. After the pains begin to abate, the urine sometimes passes off in a full stream, clearer and paler than usual. The return of the paroxysm is not governed by any rule, since the spasm sometimes only takes place once, sometimes a number of times, even on the same day.

## ALLOPATHIC TREATMENT.

Spasm of the bladder is best and most quickly relieved by an injection, into the bowel, of a teaspoonful of Laudanum, and thirty drops of the Tincture of Belladonna, in one or two table-spoonfuls of thin Starch. The injection should be made with a hard-rubber syringe. Hot applications may be made over the bladder and between the legs. This may be well done with a hop poultice.

The removal of the cause is more difficult. A gouty condition and a highly acid urine, is to be met by the use of alkalis, as the Cream of Tartar, Lemonade, made by dissolving an ounce of Cream of Tartar in hot water; after cooling, the clear, supernatant liquid is to be poured off and drank during the day, with the addition of lemons and sugar. Or Citrate of Potash may be taken as follows: Dissolve four ounces, each, of Citrate



and Bicarbonate in a pint of water. Two tablespoonsful of this may be drank in half a glass of sweetened water, after mixing with it a table-spoonful of Lemon Juice, of a solution of Citric Acid two ounces to the pint of water. The dose may be repeated four to six times a day. This makes the urine bland and unirritating. Wine of Colchicum may be given in doses of ten to thirty drops, three or four times a day, omitting its use when the bowels move too freely.

Should the trouble be caused by an inflamed (or abscess of) kidney, anodynes should be given as needed, and the person treated as directed in that disease.

If caused by a stone in the bladder, as denoted by severe pain after voiding urine, the removal of the stone by a surgeon, is the only certain treatment. Opium and Belladonna can only temporarily relieve pain.

Excessive venery is one cause which is removed only by continence.

The diet should be plain and nutritious. All stimulants should be avoided. Milk may be allowed freely. Barley-water and Flaxseed tea are appropriate as drinks.

In paralysis of the bladder, if there is overflow of urine (constant passing water), the catheter ought immediately to be used, the bladder emptied and then washed out with warm water. The use of the catheter twice a day, or oftener, is necessary, as long as the paralysis continues. The catheter used should be large, and the bladder completely emptied each time. The bladder ought frequently to be washed out with warm water.

Remedies calculated to restore the muscular power are: Strychnine, Electricity and Ergot. The dose of Strychnine is one-thirtieth of a grain three times a day. It may be given in solution with Dilute Phosphoric Acid. Take of the Sulphate of Strychnine one grain, Dilute Phosphoric Acid half an ounce. After solution is effected, add Syrup of Ginger three and a half ounces. Mix. Dose: A teaspoonful three times a day. If the patient is feeble, half a dram of the Pyro-Phosphate of Iron may be added to the mixture, and also half a dram of Sulphate of Quinine, if its tonic effect is needed.

Ergot is also valuable in this trouble. The dose of the Fluid Extract is half a teaspoonful to a teaspoonful, in water, three or four times a day.

The form of Electricity most appropriate is the direct current.

Hot hip baths, the cold douche, blisters over the lower part of the spine, is said to be serviceable.

Aloes is the most suitable purge.

## Part Eighth.

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### DISEASES OF THE SEXUAL ORGANS.

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## CHAPTER XVIII.

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### ORCHITIS.

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#### INFLAMMATION OF THE TESTES.

Now and then this affection is met with as the result of mechanical injuries, but most frequently originates in gonorrhœa. It not only supervenes during the course of acute urethritis, but it may likewise set in suddenly during gleet, generally without any apparent exciting cause. Severe exertion, or the discontinuance of the use of suspensories, are said to sometimes cause the disease, but this is not an established fact. The excessive use of beer or wine is a much more active cause of the disease, probably because the inflammation is very much increased by such stimulants. Both Cubebs and Copaiva hold the same relation to gonorrhœa. They have a specific effect upon the urethra, and it is easily conceivable that, instead of effecting a cure when given in large quantities, they aggravate the inflammatory symptoms, and, owing to the specific action which they likewise exert upon the testicles, communicate the inflammation to these organs.

**SYMPTOMS.**—Orchitis seldom sets in suddenly. Ordinarily it commences with slight drawing pains in the spermatic cord which is sensitive to contact. At the same time the patient experiences violent tearing pains in the thigh of the affected side. The weight of the testicles at first is troublesome, then becomes painful and finally intolerable. In one or two days the epididymis becomes painful to pressure, swells with more or less rapidity, and shortly after is succeeded by an inflammatory effusion into the tunica propria, in consequence of which the testicle very soon enlarges to the size of a fist. The pains now become agonizing; the patient has to confine himself to a horizontal posture with the testicle properly supported. The pain is a burning-tearing pain, most frequently with remissions after the fashion of rheumatic pains. The general condition of the patient does not suffer much, only in violent cases there is fever or even vomiting. The discharge usually disappears after the orchitis is fully developed, and does not re-appear until the inflammation has run its course; only in a few cases it does not reappear after the subsidence of orchitis.

The inflammation in its acute form does not often last beyond the tenth day, sometimes the improvement commences on the fourth day. This, however, is not very rapid, since it sometimes takes weeks before

the testicle resumes its former size; very frequently an obstinate swelling of the testicles remains.

#### ALLOPATHIC TREATMENT.

Inflammation of the Testicle is to be treated, first, by *absolute rest*. The patient should be confined to his bed and should not be permitted to rise for anything. The bowels should move into a bed pan, and the urine voided while lying down; above all he must not walk about, nor even sit in a chair. The testicles must be supported by a roll of soft cloth between the thighs, while the patient lies upon his back. The support must be sufficient to relieve the pain as much as possible.

Such applications should be made as will give the greatest relief to the pain. This is generally best done by hot applications, as flannels wrung out in hot water, covered with oiled silk to retain their moisture, and heat or warm poultices. Sometimes cold applications are more grateful; they should then be resorted to and even ice applied, if it relieves the pain more than other means. I have often found cloths dipped in a solution of *ten grains* of the Acetate of Morphine and *two scruples* of Sugar of Lead in *a quart* of soft water, a grateful application.

A brisk purge may be given at the beginning of the trouble. For this purpose nothing is better than a couple of tablespoonsful of Epsom Salts. (If this amount is boiled a couple of minutes with two and a half teaspoonsful of roasted coffee in an earthen vessel, and allowed to draw for a few minutes, then strained, it can be taken without trouble) or the same amount of Citrate of Magnesia, or Rochelle Salts taken in lemonade, or a couple of Seidlitz powders may be used.

During the highth of the inflammation a quarter of a grain of Morphine or twenty-five drops of Laudanum, with ten or fifteen drops of Tincture of Belladonna may be given sufficiently often to relieve the pain. Or a teaspoonful of Laudanum and thirty drops of Tincture of Belladonna, with a couple of tablespoonsful of thin starch may be given by injection into the bowel, once or twice a day and any additional anodyne, if needed, given by the mouth.

If the inflammation leaves the testicle in a hardened condition which does not disappear, it may be removed by applying Tincture of Iodine once a day, or every other day.

#### HOMŒOPATHIC TREATMENT.

ORCHITIS OR INFLAMMATION OF THE TESTICLES when depending on an injury can be relieved by ARNICA. A dose every four to eight hours; also apply externally.

If the result of Gonorrhœa, by CLEMATIS or AURUM if a dose is taken every evening.

PULSATILLA is also a reliable remedy if the swelling is considerable without fever or thirst.

ACONITE if there is much fever and thirst, and especially if this should occur at the beginning of the attack, which it should usually be expected will be the case.

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#### SPERMATORRHŒA.

By this heading we, strictly speaking, comprehend a flow of semen without any sexual excitement. However, in order to avoid the necessity

of resorting to a number of sub-divisions, we have classed together in this chapter abnormal nocturnal emissions, as well as various other morbid derangements of the male sexual organs; an additional motive for this arrangement is the circumstances that the treatment of most of these conditions is the same.

The functions of the male sexual organs vary in accordance with temperament, mode of life, constitution, etc., to such an extent that it is often difficult to decide whether these differences are of a morbid nature or belong to the normal standard. This can only be determined by the manner in which the male sexual sphere is generally affected by the local phenomena; whether the organs are not abnormally disturbed, or whether the procreative powers are impaired or even suspended.

The history of these various abnormal conditions of the sexual sphere is pretty much the same. Debilitating constitutional diseases, or acute diseases during the period of convalescence are apt to cause a so-called irritable weakness in the sexual sphere, which, in the former case is permanent and in the latter case only temporary. This fact is most strikingly witnessed in diabetes and tuberculosis. In the last-named condition the excessive irritability of the sexual organs contributes to hasten the general decay. A second cause are cardiac and nervous diseases, which may, however, likewise result from the sexual weakness. Hypochondria is a frequent cause, and still a more frequent consequence of sexual weakness. The most common cause of sexual weakness is the vice of onanism, which is too much overlooked by physicians. Yet it is certain that thousands might, by a timely warning, be saved from unspeakable mental and physical disease.

Excessive nocturnal emissions generally take place between the years of twenty and twenty-five, and exceptionally at an earlier age, even sixteen. They are of a morbid nature if they occur almost regularly without rousing one from sleep, and if they do not occur often, yet leave for days a sensation of languor and debility, and of mental depression. They are likewise abnormal if they occur several times in one night or week. Moreover, every emission that takes place in the waking state, with or without any special cause, at stool, for instance, is to be regarded as abnormal. The consequences of such abnormal losses very soon show themselves: Paleness of the face, with dark margins around the eyes; insufficient sleep; drowsiness, with inability to sleep; dullness of the head; aching, pressing pain in the head; vertigo; irritable, sensitive temper; aversion to society, to work, and, after a while, a deranged appetite and digestion, deficient assimilation.

Spermatorrhœa, properly speaking, consists in a loss of semen at every emission of urine, at stool, without any cause, or after the most trifling erections. The pernicious consequences of this sort of spermatorrhœa, manifest themselves much more speedily than after nocturnal emissions, most probably because spermatorrhœa never occurs in organisms whose physiological functions had been carried on in normal manner.

Irritable weakness of the sexual organs is sometimes the cause, but more frequently, the consequence of both the previously-mentioned an-



omalies. The sexual excitement occurs too easily and too vehemently without possessing sufficient energy and consistence for the act of coition. The ejaculation of the semen takes place too soon, or even not at all, or the introduction of the penis into the vagina is prevented, by a premature cessation of the erection. The sexual weakness may be characterized by all sorts of abnormal manifestations in the sexual sphere. The mental disposition exerts a powerful influence in this direction. Hypochondriacs are particularly disposed to irritable weakness which, under abnormal mental influences, sometimes attains to such a degree of intensity that it seems to amount to complete impotence.

Complete impotence, by which is meant an entire suspension of the ability to perform the sexual act, is, upon the whole, a very rare and, frequently, only temporary disorder, except when depending upon debilitating incurable constitutional diseases, such as diabetes or tuberculosis, or when depending upon the loss of one testicle.

An excess of sexual excitement (satyriasis) besides taking place at the commencement of gonorrhœa, as we have already stated, may likewise occur in consequence of debilitating conditions; first as a passing increase, and subsequently to be succeeded by a decrease of excitability. It is frequently met with in the case of persons who have been addicted to the vice of onanism, or among worn-out rouses; very rarely without such a cause, and then mostly as a symptom of some deep-seated disease of the brain.

In treating most of these forms of sexual weakness, the diet, mode of life and psychical (mental) agencies exert an important influence; hence we place them in the front rank.

We cannot lay it down, as a rule, that these morbid conditions require either a lean or a strengthening diet. Some are afflicted with weakness of the sexual organs, more especially with excessive pollutions, because they live too well; it is a mistake to suppose that this waste is repaired by a nourishing diet, since it is well known that some persons are living in circumstances which preclude the possibility of indulging in good living. Hence it becomes a matter of interest to inquire whether a lean or a rich diet is the more suitable. All such patients must be cautioned against going to sleep with a full bladder or a full stomach, either in the daytime or at night. Certain beverages, such as spirits and hop beer, must be strictly avoided. Beer-drinkers are very apt to deny the debilitating influence of hop beer on the genital organs; that this influence exists, must be evident to all who are acquainted with the effects of Lupulin. It is well known that drunkenness, either partial or total, causes an irritable weakness of the sexual organs. Coffee, and, in some, even tobacco, have to be interdicted; among the secondary effects of coffee, we notice a depressing excitability and irritability of the nervous system.

In general, all strongly spiced and stimulating food is hurtful. As regards bodily exercise, it is certain that bodily fatigue diminishes sexual excitement, and brings it back again to a normal standard; muscular exercise has also the advantage of preventing the mind from dwelling

upon erotic subjects. Viewed from this point, walking is not the best kind of exercise, for the reason that it leaves the mind free to revel in all kinds of fancies; onanists are very apt to be fond of walking. Severe mental labor is sometimes preferable to bodily exercise, especially in the case of hypochondriacs and onanists. This leads us to a consideration of psychical influences as a means of cure.

Every physician knows that the evil consequences of nocturnal emissions, and even, to some extent, of self-abuse, are more imaginary than real. Numbers are made hypochondriacs by reading books that fill them with fear and trembling at the excesses they may have been guilty of in former days. Encouraging advice does more good than medicine. Self-abuse is prevented much more certainly by comforting encouragement than by picturing the consequences of such a crime in the most frightful colors. In dealing with sexual weakness it is in the first place necessary to depress the fancy, and in the second place to strengthen the will. On this account, reading novels is so hurtful, and cold-water treatment has such an excellent effect.

Prof. O. S. Fowler, the world-renowned Phrenologist and keen observer, makes these truthful remarks about the prevention of this fearful vice, self-abuse, by knowledge :

“WHAT SALVATION remains for those yet guiltless? To forestall is infinitely better than to cure. Must all our noble boys, all our pure, lovely girls, be defiled by this moral leprosy, and lost if not redeemed?

“Is there no PREVENTION? Can they not, somehow, be kept from this fell destroyer? Must all fall over this moral precipice only to be marred and defiled for life? What a pity, this offering up of human life on this vile altar! We cannot spare our sons, we must not lose our daughters thus! They are too infinitely precious. Think what a darling child is worth! Its entire future, and all its descendants are at stake. The risk is too awful. No parents should sleep until they have first so hedged their children around that they cannot sin. How can this plague be stayed? NOT BY IGNORANCE. *That* has been tried, only to fail, quite too long already. All who fall, sin for want of knowledge. Nothing can be clearer. Say ye who have sinned, did you not err through ignorance? Would not one seasonable word have prevented all the suffering it has caused you? Let universal experience decide. PARENTAL WARNING and COUNCILING are its great forestallers and preventers. Parents are bound to feed, clothe and educate their children, and guard them against lying, stealing, etc., then why not against this secret sin as well, as much the *most*, as it is ruinous to soul and body. God in nature puts on parents the sacred duty of guarding their children against all sinful and self-ruining practices; and their first is to guard them against this vice. And the guilt of those who do fall rests not on the poor, life-long suffering victims, but on their parents.

“An eighteen-year-old liliputian, in Portland, Me., when told that this had made him small and weak, clinched his fist, gritted his teeth, and muttered curses upon his father and elder brother who lately deceased, who died by this sin, because they allowed him to fall by not warning him, and he was RIGHT. So has any other child whose parents let him or her

contract this vice. Parents are their children's keepers, not the children their own. Choose your own means, but use *some effectual* end! Give them no occasion to curse your neglect. The mother is more especially adapted and required to teach this class truths. In ordaining that she nurse them, Nature commands that she supply their other physical wants, and also mould their morals! Those who defile themselves may justly blame her most; yet blame is too weak a term. *She* should teach them the sacredness of this structure, and to guard it as the apple of their eye.

"All communities contain sufferers from sexual abuses; let her make such her walking examples of breaking this law of chastity. Parents should teach sexual truths, aided by good books as early as they can be understood. You must plant knowledge before the sin has taken root; *much* best—before the seeds of sin have been sown.

"TO THE SEXUAL EDUCATION OF GIRLS, these principles apply with redoubled force. Young America learns such things *early* and *EASILY*."

Stop the act, and that and cold water will complete the cure; curse medicines.

#### ALLOPATHIC TREATMENT.

In Spermatorrhœa, if the discharges are only occasional, and the general health is not affected, no special treatment is required; if the patient is unmarried, as soon after marriage the annoyance will cease without treatment. It is best, however, that he should not eat a hearty meal for four or five hours before retiring; he should empty the bladder before retiring; the bed should be hard and the coverings rather light; he must lie on his side, never on his back, and rise about the middle of his night's rest, and stepping on the cold floor, empty his bladder again.

In instances in which the health has become debilitated, and the functions of the mind impaired, it will be necessary to institute medical treatment. In these cases, the whole nervous system has lost tone. The diet should be nutritious but plain, cold bathing and tonics should be resorted to. If the patient is unmarried, I would put him upon the use of Strychnine and Quinine dissolved in Dilute Phosphoric Acid, as take of Sulphate of Strychnine a grain, Dilute Phosphoric Acid one ounce; after the Strychnine is dissolved, add half a dram of the Sulphate of Quinine, and three ounces of Syrup of Orange Flowers, or Simple Syrup; if the patient is married, I would give two or three grains of Pyro-Phosphate of Iron in Syrup, after eating, giving the former mixture before eating; or, instead of the first mixture, Phosphide of Zinc and Nux-vomica a quarter of a grain each may be taken in pill three times a day; or the pills of Phosphorus, Nux-vomica and Quinine may be used. In addition, teaspoonful doses of Fluid Extract of Ergot may be taken one, two or three times a day; from two to twenty drops of Tincture of Belladonna may be given with the Ergot, at night, with benefit. The dose should be increased until benefit or dryness of the throat is produced.

In cases more extreme, with greatly reduced health, it may be necessary to resort to Cod Liver Oil, in addition to other tonic treatment.

In rebellious cases, Mr. Erichsen's method of applying a solution of Nitrate of Silver to the neck of the bladder through a silver catheter having several fenestrations (openings) should be resorted to. The strength of the solution should be five grains to the ounce, at first; but after two or three weeks, if no improvement result, the strength may be increased. The solution is driven out of the openings by a sponge fastened to the end of a wire stylet being pushed through the catheter to the end next the bladder. Occasionally, the daily introduction of cold steel sounds will answer the same purpose.

The measure which succeeds in the end, without fail, is life in wedlock. In some extreme cases, the cure is not attained for a year or perhaps more. Only a temporary lack of capacity exists, and eventually a complete cure results, if the patient lives a married life, and the general health is good, or restored with the use of appropriate tonics.

If the person is unmarried, and in robust health, it is best to use the following prescription: Take of Bromide of Potassium an ounce, Infusion of Digitalis eight ounces. Mix. Dose: A tablespoonful twice a day, and after the emissions cease, give at night only. In this class of persons, from two to five two-grain pills of Monobromated Camphor, taken twice a day, is appropriate treatment. As with the Bromide of Potassium, after the involuntary emissions cease, the medicine need only be taken at night. When the Bromides of Camphor or Potassium are used, and the discharge is not stopped, a pill of a third of a grain of Extract of Belladonna and one or two grains of the Extract of Hyoscyamus should be taken, at bed time, in addition.

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## CHAPTER XIX.

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### DISEASES OF THE FEMALE SEXUAL ORGANS.

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#### LEUCORRHŒA.—WHITES.

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##### CATARRH OF THE SEXUAL MUCOUS LINING.

Simple catarrh is one of the most common derangements of the female sex. It originates in a variety of causes. In the first place we have to mention as exciting causes such as act directly upon the sexual organs—excessive coition and self-abuse, miscarriage, and to some extent confinements, which, if occurring in too rapid succession, almost always cause leucorrhœa, especially when after the last named causes the patients persist in getting about too soon.

Sudden and violent attacks of vaginitis and leucorrhœa have been observed to arise from causes such as those which follow sudden suppressions of perspiration; of diarrhœas, or of sudden suppression of milk, or in other instances, suppression of some eruption on the skin.

The influence of cold damp weather, or exposure to cold and damp from the location of the residence in a marshy district, or perhaps the nature of the house itself (stone, with walls constantly moist on their inner



surface) and from water standing in the cellar, especially when long continued, is a powerful promotor of leucorrhœa.

An entirely opposite but not less numerous class of causes of this disease may be found in the high living, stimulating spices, condiments, and drinks in which many women indulge.

**SYMPTOMS.**—At the first appearance of leucorrhœa, there are usually the indications of acute inflammation, pain, heat, and redness of the parts involved, which may subside as the discharge becomes more and more fully developed. With this discharge, whether acute or chronic, there will usually be more or less pain in the groins and hypogastrium (lower part of the abdomen) and in the lower part and small of the back. The urethra will often become implicated, causing painful micturation (passing water) and sometimes causing almost inability to urinate, in the acute form.

### HOMŒOPATHIC TREATMENT.

The radical cure of this disorder is attended with much difficulty, and can only be effected by long, patient, and careful treatment in those cases in which it is incidental to serious derangements of the womb or of its appendages.

**PULSATILLA** is indicated when the discharge is thick, like cream, or milky, and sometimes gives rise to a burning sensation: when, moreover, it is associated with indigestion, and occurs in females of relaxed fibre and lymphatic temperament, or in whom the monthly flow is irregular and scanty; the discharge is often worse when lying down.

*Dose:* Six globules in a teaspoonful of water, morning and evening, for four days (unless a decided change should sooner occur); then pause four days, after which the course may, if necessary, be repeated as before, and so on.

**SEPIA** should be selected when the affection occurs in delicate and exhausted females, the discharge being yellow or green, generally watery and more or less acrid or corrosive; and when it is accompanied by a tendency to profuse perspiration, particularly on sitting down, after walking. *Sepia* is also additionally indicated, if the monthly discharges are irregular; and, further, when bearing-down pains are often experienced.

*Dose:* Four globules, in other respects as directed for *Calcaria*.

**CHINA** should be given when the discharge is very profuse, and gives rise to great debility; the menses seem to be suspended, or the leucorrhœal discharge occurs instead; painful pressing towards the groins and anus.

*Dose:* Four globules, as directed for *Pulsatilla*.

**ÆSCULUS HIP** (Buckeye), is indicated where the whites are accompanied by intense pain and lameness in the back and hips, so that it is almost impossible to rise after sitting, or to walk a long distance; constipation, and piles.

*Dose:* Three globules, as directed for *Pulsatilla*.

**KREOSOTUM.** The discharge precedes and follows the menses, and is greatest when standing or walking; it is yellow, offensive, acrid, and corrosive, causing soreness of the parts, and violent itching.

*Dose:* Three globules, as directed for *Pulsatilla*.

**PODOPHYLLUM** should be administered in case in which the discharge is thick and transparent, and there is constipation, and a feeling of bearing or pressing downwards in the genitals; falling of the womb, and protrusion of the intestine during stool.

*Dose:* Three globules, as directed for *Pulsatilla*.

**COLLINSONIA** is indicated by cases in which the discharge, which may be thick or thin, is accompanied by great itching of the parts; and there are obstinate constipation, and disordered and painful menstruation.

*Dose:* Three globules, as directed for *Pulsatilla*.

**IODIUM** may be found very useful in cases of long standing; particularly in scrofulous subjects; the whites are most abundant at or near the time for the menstrual flow; and the discharge is so very acrid and corrosive that not only are the adjacent parts made sore, but the underclothing is made rotten and destroyed.

*Dose:* Six globules, as directed for *Calcareæ*.

**DIET AND REGIMEN.** The diet ought to be simple, but generally very nutritive. Coffee and tea ought to be avoided, and cocoa or arrowroot substituted. Regular exposure to the benign influence of the fresh air is commendable, but over-fatigue and prolonged standing should be sedulously avoided.

#### ALLOPATHIC TREATMENT.

The treatment of Leucorrhœa or Whites must necessarily be directed first to the cause, as failure of the general health, as from constipation or anæmia (impoverishment of the blood), the treatment will relate primarily to the treatment of consumption, for which directions will be given in the article on consumption, or if the patient is anæmic (pale, weak, and tired, especially tired upon rising after full nights rests), the treatment will first be directed to the removal of the anæmic condition, by the use of tonic remedies, especially Iron. When the discharge is very profuse, and exhausting the Phosphate or Hypophosphite of Lime, may be given with great advantage. During the general improvement of the body, the discharge diminishes. In Parrish's chemical food (Compound Syrup of the Phosphates), we have both the Iron and Lime. The dose is a teaspoonful. It may be mixed with an equal part of Syrup of the Lacto-Phosphate of lime, and a dessertspoonful given three times a day. The Compound Syrup of the Hypophosphites (Lime, Soda, Potash, and Iron), meets the indications, and is agreeable to take. The dose is from a teaspoonful to a dessertspoonful three times a day. If there is colicky pains, or symptoms of dysentery the Hypophosphites should be combined with Dilute Phosphoric Acid. Take of the Compound Syrup of Hypophosphites seven ounces, Dilute Phosphoric Acid one ounce, mix. Dose one or two teaspoonful three times a day. It is a good rule to add the Dilute Phosphoric Acid, to the Hypophosphites whenever they are given.

In marshy districts or when Ague is prevalent, Quinine should be given for a week, alternated with Cinchonidias for a week, in doses of two or three grains three times a day, or such other treatment as is suitable for Ague poisoning, given in the treatment of intermittent fever. Sometimes a change of residence is necessary to retain better hygiene. Exalted

activity of the *sexual* organs will demand an omission of the relations of the bed. There are few causes of Leucorrhœa in which the uterus is sound. The organ is relaxed, and probably enlarged, and the secretion of the mucus membrane increased, showing a chronic inflammation, or congestion. Flexions (the womb bending on itself), or other displacements of the organ, must be corrected by mechanical means. The skill of a physician is required, but if unavailable, it may be said here that the common ring pessory relieves more cases of displacement than any other instrument that can be used by the un-skilled hand. The neck of the womb should rest within the ring after its introduction. The concave pessory ought not to be used as a rule; it makes a flexion worse, as do the stem pessories with a cup. Adjusted by a skilled person some form of Dr. Hodge's bow pessory is suited to most displacements. Correction of the malposition of the womb relieves the congestion, and does as much towards curing the discharge. This caution must be added; an unsuitable or illy fitted supporter, is a positive injury. The enlargement and chronic inflammation is generally caused by rising too soon from child-bed or after an abortion. A long period of rest in bed, is required after these events; four weeks will do, but sometimes a longer time is required. The binder wide enough to reach from the ribs to the middle of the thighs, should be kept tightly pinned after delivery. After the lochia (flow), ceases the warm vaginal douche should be commenced. Constipation, must be obviated as directed for that trouble. The preparations containing Aloes are to be preferred. Diet should be nourishing, and exercise at first moderate. Too frequent pregnancies in women, liable to abortion is another cause of chronic enlargement, and of a condition causing Whites. The womb must have rest after an abortion, as well as after confinement, this is necessary for months sometimes. Too frequent menstruation is another cause to be obviated, if possible. In this chronic enlarged condition, a teaspoonful of the Fluid Extract of Ergot with ten or fifteen drops of Tincture of Nux-vomica may be taken two or three times a day. Ten grains of the Iodide of Potassium in sweetened Peppermint water three times a day, is a beneficial remedy for this enlargement, and for the chronic discharge. Iron may be indicated in the form mentioned above. Change of climate, and the use of mineral waters may sometimes be called for, but generally the indication is met by the Hypophosphites recommended above.

The kind and quantity of food should be regulated to meet the wants of the system. Sleep should be long and undisturbed. The skin must be kept warm with flannels, bathing, rubbing, and out door exercise.

The bath should, as a rule, be warm and tepid, taken daily and followed immediately by cool bathing. The combined sitz and sponge bath is most generally applicable; after the bath the skin should be rubbed until it is aglow. If there is a poor, or no reaction, the cool bath should not be used. Some are most benefited by the warm baths exclusively.

While many cases of leucorrhœa can be cured without them, injections are very valuable in treating this trouble, and sometimes they are a necessity. A long flexible syringe having a long vaginal tube, should be selected, and often the form called the "Douche." The syringe should be

filled and one end of the tube introduced into the vagina and the other in the bucket containing the fluid which is raised considerably higher than the patient. The height of the bucket and the length of this column of fluid governs the force of the current. The flexible tube should therefore be long. In this way any quantity of fluid can be used at an injection without wearying the patient. She should lie upon her back with her hips raised with a pillow and a rubber cloth so arranged that the fluid may be conducted into a bucket. In the use of water injections I have found warm water (as hot as can be borne) the best. The quantity allowed to flow through the vagina should be large; one or two gallons frequently repeated. Sometimes the cold douche alternated with the hot douche and less often the cold douche alone, gives better results. The diseased surface is not generally the vagina but the interior of the womb, which medicated injections do not reach. They are often, however, useful. The simple water injection should be used first, followed by a quart of the medicated injection. A strong tea of White Oak Bark with or without the addition of one or two teaspoonsful of Alum in the quart may be used. One or two drams of Tannin and four drams of Alum to a quart of water, is often serviceable. One or two even teaspoonsful (drams) of Sulphate of Zinc in a quart of water may be used. It is often better to change the injection from time to time. If the flow is offensive the Permanganate of Potash, two drams to the quart, or one dram of Carbolie Acid to the quart of Water may be used for an injection. If the discharge is irritating bathing the external genitals with a solution of Soda or Borax will be useful.

Many times the physician has to resort to topical applications to the neck of the womb and its cavity, for which the following preparations of Iodine and Tannin are highly useful. Take of Iodine half a dram, Iodide of Potassium and Water, of each a sufficient quantity to dissolve the Iodine, Glycerine sufficient to make an ounce, then add two drams of Tannin, or such quantity as is desired. The Tincture of Iodine saturated with Tannin is a very efficient application in chronic inflammation of the neck and interior of the womb, and in enlargement of the organ, so prolific of leucorrhœal discharge. Also an excellent plan of local treatment which must also be made by the physician, is, Iodoform one dram, Tannin one ounce. Mix well. A sufficient quantity of this powder is to be packed dry around the neck. One of the most effectual applications in these same affections with ulceration and consequently for the leucorrhœa, is the undiluted Carbolie Acid, which may be applied to the neck and cavity of the womb with a probe wrapped with cotton, but by a physician only. Before making this internal application, the uterine (womb) cavity should be dilated with a sponge tent.

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#### MENSTRUATION.

By menstruation we understand a flow of blood from the female sexual organs recurring at regular intervals. It is a sign that the female organism has attained the faculty of conceiving, and depends upon the fol-



lowing processes: The gradual maturing of an ovulum (egg) in the ovaries determines an increased afflux of blood to those organs. If this congestion has reached its acme, the other organs of the sexual system participate in this hyperemia (congestion) to such an extent that the blood-vessels become ruptured and a more or less considerable discharge of blood takes place, accompanied by a sometimes more extensive and at other times more local detachment of the epithelial lining of the sexual organs. While the discharge of blood lasts, the matured ovulum (egg) enters the fallopian tubes, which renders its fecundation possible. A discharge of blood need not necessarily accompany the passage of the ovule into the tubes; otherwise how could a woman who is nursing her baby and does not see the least sign of a menstrual show, conceive again at such a time? That this happens, is a fact established beyond the possibility of a doubt.

According to circumstances the menses appear at times sooner, and at other times later. They are influenced by climate; the nearer to the equator, the sooner the menstrual period appears; they are likewise influenced by the mode of living; in cities the menses appear sooner than among country-girls; by the mental capacities: the more advanced the mental development, the earlier the menstrual functions make their appearance. The constitution exerts no particular influence; very robust girls sometimes menstruate very late, whereas feeble ones often menstruate prematurely. According to the circumstance the menses may set in between the ages of ten and twenty years; in our climate they appear in cities between the ages of fourteen and sixteen, and in the country between the ages of sixteen and twenty years.

The quantity of the menstrual blood is likewise variable and cannot be determined a priori; stout women sometimes lose a small quantity of blood, whereas feeble and spare-bilt women lose a great deal. The quantity is from two to eight ounces.

Nor is the duration of the menstrual flow the same in all cases. It generally averages five days, but, without being considered abnormal, may last only two, or may be extended to eight or nine days. Sometimes the bleeding stops for a short time and then reappears again.

The periodicity of the bleeding likewise varies. By far in the majority of cases it returns again every twenty-eighth day. In many cases there is an interval of four weeks between the periods; in a few cases we notice an interval of twenty-one to thirty days. Four weeks may be considered the normal length of the interval between each two successive turns.

The influence of the menses upon the general health is sometimes considerable and at other times none at all. We notice hyperæmia of the vagina and of the external pudendum, sometimes with increased secretion of mucus; tumefaction of the breasts with painful, knotty swelling of single milk ducts. During the menstrual flow the nervous system is much more sensitive and excitable, whence the following phenomena: chilliness alternating with flashes of heat; headache, hemicrania, vertigo, languor, drowsiness without any ability to sleep; irritated, whining mood; loss of appetite, palpitation of the heart. In addition to these derangements, we often see a sickly, gray complexion, efflorescences in the face, margins around the eyes; vomiting or nausea; altered voice. These phenomena usually occur only during the first

twenty-four hours of the flow, after which they cease either suddenly or gradually.

The total cessation of the menses takes place indefinitely, some women menstruating regularly until the age of 55, whereas others cease to menstruate when they are 30 years old. These differences do not depend upon the time of the first appearance of the menses, or upon the vigor of the individual, upon the number of times a woman has conceived, nor even upon other morbid conditions. The final cessation is not bound by any rule, and may take place quite normally between the ages of 40 and 50 years. It may occur suddenly and completely, or in paroxysms; some periods, even to the number of ten or twelve, being skipped, after which the menses may occur again regularly for months, or a sort of hemorrhage may set in, which is again followed by a stoppage of the menses. As a rule the quantity of the menstrual flow is larger as the period of a final cessation draws near, than in the preceding years.

In the previous paragraphs we have only briefly alluded to the most important points. But they show satisfactorily the importance of the menstrual function to the female organism. Hence, it is that menstrual irregularities have, at all times, excited a lively interest among physicians as well as lay-persons, to such an extent that they have been classified under special heads, although, in reality, they constitute a symptomatic manifestation of one and the same general or local disease. The question now is, when, in a general sense, menstruation may be said to be abnormal. The menses are abnormal in the first place if they do not harmonize with one of the previously-indicated periods; they are likewise abnormal, if, for some cause or other, the usual duration of the menstrual flow in a given case is either shortened or lengthened. A woman who menstruates every 21st day, is not considered sick; but we consider a return of the menses every 21st day abnormal, if heretofore they had occurred every 28th day. Finally, whether the menstrual flow is to be considered abnormal, may depend upon the influence which it exerts upon the general organism. A suspension of the menses in the case of a young girl who, after being relieved from the prejudicial influences of school and city-home, goes into the country and there regains her blooming health, cannot be regarded as a morbid condition.

Every attention should be given to the mind and feelings of the young woman; her excited fancy should be controlled, and her nervous sensitiveness and excitable temperament, which are so apt to cause disease, should be quieted. For this reason, a woman should be treated with kindness and attention, especially during pregnancy and the menstrual period. Every depressing emotion, chagrin, fright, anger, acts prejudicially upon persons in health, much more upon those who are diseased. We refer the reader to our chapter on hysteria and to our subsequent chapter on chlorosis, where we shall show that a premature development of the mental faculties, and more particularly of the fancy, exerts a pernicious influence upon the constitution of the growing woman generally, and upon the normal functions of the sexual system in particular.

Woman's material mode of living deserves a closer attention. A wrong system has, in this respect, become a second nature to such an

extent, that a physician is expected to allow his patients to indulge in their accustomed violations of a proper diet, on which account we invite him to pay particular attention to the following points in the treatment of female diseases.

1. Women who lead a sedentary life, should be induced to take more exercise than usual, and to rouse themselves from their phlegmatic torpor. This is one of the first requisites of health; frequent exercise in the open air, cleanliness, frequent bathing and washing, and frequent changes of linen. During the menses, every heating exercise and every exposure to a cold should be avoided; likewise heavy farinaceous food, freshly-baked bread; violent emotions, sexual intercourse, emetics, purgatives, baths. This caution need not be carried so far as to compel healthy and robust women to lie down the first two days and even to give up their accustomed walk.

2. A bad habit that is indulged in by many ladies, is eating at any hour of the day. This practice is decidedly injurious to the success of homœopathic treatment, and should be abolished. Order is useful in all things and likewise in our meals, and patients should be given to understand that they must partake every day of a warm dinner at a fixed hour; breakfast and supper may consist of cold articles of food.

3. Too much sleep, and sleeping too often within twenty-four hours can only be approved of, if the patients are very weak and anæmic; during sleep the body has to be kept perfectly unrestrained and easy, without the least inconvenience from the pressure of the ordinary clothing; otherwise sleep will not exert the quickening influence that is expected from it. Females especially have the bad habit of lying down with a mass of clothing on. This practice not only prevents the body from getting warm, but interferes with the free circulation of the blood and thus gives rise to other troubles in addition to those already existing. Tight lacing is another censurable practice which is often the sole cause of menstrual irregularities. By going without corsets for a time the woman will soon learn to keep her back straight without any artificial support. If corsets are worn too tightly, they compel the wearer to breathe with the upper portion of the thorax, the lower ribs being not allowed freely to expand on account of the compression exerted upon them. This gives rise to an incomplete respiration, an imperfect introduction of oxygen and a diminution of the elasticity of the pulmonary vesicles. Thus it is that corsets become a co-operating cause of many of the blood-diseases of females. When speaking of chlorosis and tuberculosis, we shall revert to this subject.

4. Regarding the function of the bowels, it is of importance that our female patients should never suppress an urging to stool, and that they should at least have one evacuation from the bowels every day. Women are much more afflicted with constipation than men; in most cases they are the authors of this exceedingly prejudicial state of the bowels, sometimes on account of neglect, at other times from sheer laziness, again on account of sedentary habits, and finally because they are ashamed of satisfying the call of nature.

5. Women should make it a rule to wash their parts, especially if affected with leucorrhœa or other diseases, several times a day with cold water, and during the menstrual flow with tepid water. More recently

the Sitz-baths and the vaginal syringe are now in almost general use. These are not only excellent means of relief in many morbid conditions, but likewise excellent means of prevention, and should be found in every lady's bed-chamber. Cold water is indeed the most reliable nervine at our disposal.

#### DERANGEMENTS ATTENDANT ON THE APPEARANCE OF THE MENSES.

It must be self-evident that the awakening of the sexual life, which is the greatest revolution which the female organism can undergo, is accompanied by phenomena that very often partake of the nature of a morbid process. The normal conditions under which the menses should first appear, have been explained in a previous paragraph. A premature appearance of the menses always implies a feeble constitution and powerful sexual instinct. Hence, it is of the utmost importance not to accelerate this period because all the ailments which sometimes befall young girls at this age, are supposed to originate in the tardy appearance of the catamenial discharge. Of course, where the delay is evidently of a morbid character, nature should be assisted by such remedial means as will promote the menstrual flow.

Such morbid phenomena are the more striking, the more sensitive and delicate the young woman who had been reared in the bosom of luxury and ease. Although these ailments may not be very considerable, yet their removal often requires the interference of art. Sometimes a judicious diet is sufficient for this purpose, but in many cases medical agents have to be used. Such cases are characterized by the following symptoms: Congestion of blood to the head, as indicated by heaviness of the head; rush of blood to the chest, with palpitation of the heart, and sometimes attended with oppression of breathing; sensation of warmth and repletion in the abdomen; feeling of indolence through the whole body; occasional flashes of heat and red flushes in the face; languid feeling in the legs and feet; pain in the small of the back and pelvic region; drawing in the thighs, frequent urging to urinate. These symptoms may be regarded as menstrual distresses which are very speedily succeeded by an actual appearance of the menses and disappear with them. If these symptoms continue for a longer time without any menstrual show taking place, the patient will have to take a good deal of exercise in the open air, use more vegetable than animal diet, more liquids than usual, and spend her time as much as possible in cheerful company.

If the above mentioned symptoms become more severe and continuous; if the rush of blood is more violent, causing anxiety, palpitation of the heart, constant heat, a restless sleep full of dreams and interrupted by sudden starts; if the face looks bright-red, and the signs of cerebral hyperæmia and congestion of the organs, the chest becomes manifest: we resort to remedies that have been indicated for such conditions in their respective chapters. One of the leading remedies is undoubtedly *Pulsatilla*, especially if the congestive symptoms of the head and chest are accompanied by signs of abdominal and uterine congestion, as if a stone were oppressing the uterus, and the patient complains of chilliness, stretching of the extremities, yawning and other febrile symptoms may likewise be indicated by a certain train of symptoms. The above-mentioned dietetic



rules should not be neglected while this medicine is used. *Belladonna* may be added to this group of remedies as one of its most prominent members. Whereas *Chamomilla* is very seldom indicated, *Veratrum* and *Belladonna* will often be required, the former if the functional activity of the heart is very much impaired, as indicated by paleness of the countenance, great chilliness or constant alternation of chilliness and heat, anxious feelings; the latter if symptoms of cerebral congestion prevail, with bright redness of the face.

If the young woman has reached the age of pubescence and feels otherwise quite well, although the menses do not show the least sign of making their appearance, you would commit a great wrong to drench the organism with medicines; your duty will be to leave nature alone in determining the period for the appearance of the menses, more particularly if the organism shows signs of being backward in its development. It is only if the organism is sufficiently developed and the young woman's age justifies the expectation that the menses ought to appear, that it is proper to hasten this process by the employment of suitable remedies. We give *Pulsatilla*, and, if the indications are satisfactory, repeat the dose rather frequently, more particularly in cases where the non-appearance of the menses causes, without any other bodily ailments, an excessive nervous irritability, whining, peevish, timorous disposition, paleness of the face and great flabbiness of the muscular tissue. *Nux-vomica*, on the contrary, will be found appropriate in persons of an opposite temperament, an irascible, choleric disposition, a full habit, without any decided congestions, redness of the cheeks and turgescence of the body.

*Dose:* For any of the remedies, six pills, once in each day, dissolved in a teaspoonful of water.



#### SUPPRESSION OR DELAY OF THE MENSES—AMENORRHOEA.

"This suppression either takes place during the flow, or in consequence of causes acting previous to the actual appearance. In the former case a cold may have operated; or cold washing may be the cause; or the feet may have got chilled; or the patient may not have been sufficiently protected by her clothes; mental or moral emotions, vexations, chagrin, anger, fright, or dancing, sexual intercourse, dietetic transgressions may have led to the suppression. Most of these causes, if operating shortly before the time when the menses were to come on, may cause their retention. A gradual suppression of the catamenia may take place in consequence of deficient nutrition, as well as of the abuse of warm beverages, and the continued influence of depressing emotions. We have already shown that a change in the mode of living may superinduce a suspension of the menses, in the case of young women, without leading to derangements of the general health.

"The more sudden the suppression of the menses, the more violent the changes arising from such an occurrence. Some of the most prominent symptoms are: Violent headache, great anxiety and oppression of breathing, nose-bleed, spitting of blood, congestions of the head, heart,

and lungs, and the like. In some cases a suppression of this kind gives rise to acute uterine catarrh. If a physician is called in time, he will, of course, inquire what gave rise to the trouble, and will seek to remove the consequences of fright, mortification, anger, etc., by appropriately-specific remedies. If the physician is not called until some time after the morbid symptoms have existed, the aforesaid remedies will no longer be applicable, and the constitutional condition generally will have to be acted upon by corresponding remedies, and you should follow the same course as a physician.

#### ALLOPATHIC TREATMENT.

**AMENORRHOEA.** If the menstrual flow (menses) never has appeared and the patient is strong and healthy, and there is no menstrual molimen (symptoms or sensations) it is not prudent to resort to any interference. Every means should be employed to strengthen and invigorate the system. The body, rather than the mental faculties, should be exercised. Life in the open air and tonics containing iron, should be given if the patient is anæmic (having thin blood.) Constipation should be corrected as directed in the treatment of that disease. The preparations containing Aloes are especially appropriate.

Scarcely ever is menstruation (and menstrual sensations) absent after nineteen or twenty years, unless there is lack of development in some of the organs of generation. This is to be inferred, if invigorating measures after employment for some time, have proved ineffectual. The advice of a skillful physician should be always procured. Development of the womb to a proper size, has in some cases been induced.

Retention of the menses is probable when regular symptoms of menstruation occur without the flow, and the abdomen of the patient gradually enlarges. The cause of retention may be absence of the vagina, an imperforate hymen or colosure of the mouth of the womb. These may be overcome by the skill of the surgeon.

If the general health is good and the generative organs, vagina, uterus, and ovaries are well or reasonably developed, Iron may be efficacious in establishing the menstrual flow.

Persons who have Amenorrhœa (suppression of menstruation) are generally suffering from an indisposition of some kind with which the amenorrhœa is associated or dependent on. In some cases the patient has fallen into ill-health before the menses have ever appeared, and as a consequence there is no attempt at menstruation.

It is, therefore, perfect nonsense to attempt to bring on the monthly flow or cure the amenorrhœa, while the general health remains impaired. In a patient suffering from consumption, treatment ought not to be directed to menstruation at all, until the patient can be brought up to a good degree of general health, and then nature will establish the menses if the system is able to sustain the discharge. It is a popular error that stoppage of the monthly courses is the cause of the ill-health which accompanies it, whereas exactly the opposite is the truth; the general indisposition has caused the suppression of the menses. In the treatment of these cases the return of the monthly sickness is the final result to be attained. Improvement in other respects must be first attained and al-

most always the rest will follow as a necessity under nature's order alone.

If the patient is not surrounded by good hygiene, this is the first point to attain. She should have pure air, and exercise out of doors should be taken. This exercise, if taken for exercise, is apt to be neglected and not be of a character which will make her of cheerful spirits; recreations, such as buggy riding, and walking with cheerful companions, or rambles in the fields or woods will accomplish this, if not carried to a point which is too fatiguing.

When the patient becomes exhausted at her exercise she is going a little too far. A sedentary occupation may sometimes need to be changed for a more active one. With persons who are unaccustomed to physical exercise, this habit must be cautiously and gradually begun.

With shop and factory girls poor hygiene is most likely to be the cause of such a poor state of health as will produce amenorrhœa. In these cases, while the use of medicines follow the same rules as in other debilitated patients, it is quite secondary to the improvement of their hygienic circumstances.

In schools too little time is given to unrestrained life (exercise) in the open air and too much time to quiet mental work, and the anxiety of parents as to the intellectual development of their children, leading them to send them to school at too early an age, and to crowd them too rapidly, is a prolific source of ill-health and consequent amenorrhœa. If parents would not send their children to school until they were eight years old, and then if a large portion of the day was appropriated to every student to take such recreations as her inclinations lead her to, the breaking down and ill-health in schools for girls, would be as rare as it is now common, provided eight hours were regularly spent in sleep.

The importance of exercise is admitted in theory in these schools, but the amount is not regulated to the wants of each particular case. The long walk may be beneficial to the strong and well-nourished, if they are accustomed to such exercise. The girls not so strong and well-fed, may, in these very walks, lay the foundation for a serious disease. To make exercise most useful it must be pleasurable, and for that end restraint must be thrown off. Again, exercise ought not to be violent. The gymnasium is productive of good if not carried to an extreme. It may do much harm. Such exercises as jumping are not to be indulged; occasional and moderate horseback riding is good, but carried to an extreme it may do harm.

Early hours, good nourishing food, of which animal food form a large part, plenty of fresh air, and warm clothing are necessary to ensure good health, both before and after menstruation.

The constipation and derangement of the digestive organs is generally an effect of the state of ill-health, which is to be corrected in the first place, before the patient can take such an amount of nourishment as will bring her body to a vigorous state and maintain it there. Two or three Compound Rhubarb pills at night, followed by a Seidlitz Powder, or a dessertspoonful of Rochelle Salts in Lemonade in the morning, may be given once or twice a week for a time; or after the bowels have moved freely from the use of three or four Compound Cathartic Pills. Remedies

may be used as are directed for constipation. The pills containing Aloes and Extract of *Nux Vomica* are to be preferred.

The circulation should be maintained by free, pleasurable exercise in the open air, sponging the skin with tepid or cool water and rubbing briskly with a coarse or rough towel, until the skin is aglow, and warm clothing. It is very important to keep the feet, legs, and arms so well clothed that they will keep warm.

The two remedies which are especially serviceable in building up the health to a point at which menstruation will occur in obedience to nature alone, are, Iron and Quinine. One of the best forms for its efficacious administration is the Citrate of Iron and Quinine in doses of from three to five grains three times a day. It may be dissolved in Syrup of Ginger or Orange Flower water. Take of Citrate of Iron and Quinine two and a half drams, Syrup of Ginger six ounces. Take a teaspoonful or a teaspoonful and a half three times a day. If the bitter taste is seriously objected to, one or two grain pills of the Sulphate of Quinine may be given two or three times a day, and the same quantity of the Soluble Citrate of Iron may be given in solution with Cinnamon or Orange Flower Water in the same proportions as directed for the Citrate of Iron and Quinine.

The Pyrophosphate of Iron answers the purpose very well. It can be given as follows: Take of Pyrophosphate of Iron two and a half drams, water sufficient to dissolve, Syrup of Orange sufficient to make six ounces, mix. Dose a teaspoonful three times a day. The Tincture Muriate of Iron has long deservedly enjoyed a reputation in the cure of amenorrhœa, and is one of the most effectual. The dose is fifteen or twenty drops three times a day, largely diluted in sweetened water.

Before buying the sugar or Gelatine coated pills of Quinine one of these should be cut open with a knife, if they are good they will be soft under the coating.

After the use of Iron and Quinine for a time, if health is not restored it is well to change to the use of Iron with Strychnine. Take of the Citrate of Iron and Strychnine seven Scruples, water sufficient to dissolve, Syrup of Ginger or Orange a sufficient quantity to make six ounces. Dose, a teaspoonful three times a day. Each teaspoonful contains a fraction less than a thirtieth of a grain of Strychnine.

If the patient does not suffer from impoverishment of the blood, or if they have recovered from the anæmia, from three to five drops of Fowler's Solution three times a day may be given with benefit. It seems to restore the activity of the ovaries. The Chloride of Gold and Soda in pill, one twentieth of a grain each, three times a day is also thought to be beneficial, in the same way.

Dyspepsia must be treated as is directed in that disease. It may sometimes be advisable to keep the patient for a time on a milk diet. Only such food should be given as is found by experiment to be readily digested. Milk, beef tea, eggs beat up with sugar and water or milk, are some of the easiest digested, and nutritious food.

The object in treatment is first to put the body in good health as the amenorrhœa is only a symptom of the state of ill health.

If menstruation have been suddenly suppressed, it is best to give a hot



sitz (hip) bath, a copious drink of Ginger tea, place her in bed and give her a full dose of Dover's Powders (ten or fifteen) grains, especially if she has had a child. A mustard plaster may be put over the lower part of her abdomen, and bottles of hot water about her hips and loins. The use of electricity has in some instances caused a return of the flow. A hot water injection into the rectum may be made.

When the time for menstruation has past, we must wait until just before the next period, when for three or four days a warm hip bath should be given night and morning. If there is no pregnancy some of those remedies called emenagogue (calculated to promote the flow of menses), may be given, if the physician desires, but as so much harm may be done with these, it is deemed proper not to give directions for their use in a popular book.

When the mental emotions have been the cause of the sudden suppression, Opium to the extent of producing quiet in doses of half a grain to a grain is the best remedy. Landanum in doses of ten to twenty drops, or Paregoric in doses of two teaspoonsful may be given.

Chronic suppression should be treated on the principles before given, viz: correction of the general health, and from month to month encourage the menstrual flow by the gentle measures just enumerated.

#### HOMŒOPATHIC TREATMENT.

PULSATILLA should be employed when a suppression takes place from the sudden effects of a chill, when the symptoms generally correspond with those described under the head of that remedy, in the article on Chlorosis.

*Dose:* Six pills in a teaspoonful of water, night and morning, for a week (unless a change should sooner occur); then pause eight days, after which the course may, if necessary, be repeated as before, and so on.

COCCULUS in cases in which there are habitually attacks of colic-like pains in the bowels at the periods at which the menstrual discharge should occur if it were regular, more especially if the patient complains of great weakness of the lower extremities, languor and lassitude, precarious appetite, and generally also nausea, with much oppression at the chest and in the region of the stomach, etc.; especially when this functional derangement occurs in full-habited and apparently healthy persons, particularly if the suppression be traced to mental emotions.

*Dose:* As for Pulsatilla.

NUX-MOSCHATA when the suppression is accompanied by spasms and other hysteric affections; *disposition to sleep and faint away*; great nervousness; complete exhaustion after slight exertion; pains in the loins, etc.,

*Dose:* As directed for Pulsatilla.

CAULOPHYLLUM should be given when there are spasmodic, bearing-down pains; and sympathetic, crampy, spasmodic pains in the bladder, rectum, or bowels.

*Dose:* As directed for Pulsatilla.

VERATRUM should be administered in cases in which the convulsive

and other symptoms incidental to the suppression, when caused by fright, have failed to yield to the last-named medicine; and when there are pale, livid face; frequent nausea and vomiting; cold hands, feet, and nose; great weakness, with fainting turns.

*Dose:* As directed for *Pulsatilla*.

LYCOPODIUM has proved of service in cases in which the patient complains of headache and giddiness; flatulent distention of the bowels before each period at which the secretion ought to have returned; and habitual costiveness.

*Dose:* As directed for *Pulsatilla*.

BELLADONNA should be employed in cases which are associated with fullness of blood, determination of blood to the head, violent throbbing of the arteries of the head and neck, and nose-bleed.

*Dose:* As directed for *Pulsatilla*.

SULPHUR is one of the most important remedies for the treatment of cases which assume a chronic and obstinate character, more particularly if such cases occur in persons of a feeble or exhausted constitution, or who bear about them, in a marked degree, the traces of a scrofulous habit of body, or who are affected with the piles; or, again, when the prevailing symptoms are such as have been described in detail under the head of this medicine, in the article "Chlorosis or Green-Sickness."

*Dose:* Six pills in a teaspoonful of water, the first thing in the morning, fasting, for six days (unless change should sooner occur); then pause ten days, after which the course may, if necessary, be repeated as before, and so on.

SEPIA is also of great value, whether at the onset or after the previous administration of *Sulphur*, for the treatment of chronic and difficult cases, and for such as are complicated with scrofulous taint of constitution, or which occur in otherwise feeble and exhausted subjects. *Sepia* is more especially appropriate when the prevailing symptoms are such as have been described in detail under the head of this medicine, in the article on "Green-Sickness."

*Dose:* Four pills, in other respects as directed for *Sulphur*.

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## MENORRHAGIA.

### PROFUSE MENSTRUATION.

The quantity of the menstrual discharge varies a great deal in different individuals. The climate, constitution and manner of living have considerable influence. The duration of the discharge, and the periods of return, are also varied. In some women it continues from four to ten days, while in others it lasts only a few hours; from three to six days is, however, the most usual period. The regularity is, in many cases, exact to a day, or even an hour; while in others a variation of several days is a usual occurrence without the slightest disturbance in the usual health resulting therefrom.

An excess of loss of menstrual blood, a true menorrhagia, does not

occur as often as it may seem to those who complain of it. To constitute menorrhagia, several circumstances have to occur that require to be carefully discriminated. The generality of discharged blood has to exceed the ordinary loss quite considerably; and then, again, we have to inquire whether the scantiness of the ordinary menstrual flow is not an abnormal diminution in the present case. The menstrual flow is likewise considered too copious if it continues beyond the ordinary period, although *this need not* necessarily imply that the menses are profuse. It is, therefore, the morbid character of the menses that is necessary to determine the disorder, for a copious flow of the menses cannot be considered abnormal as long as the constitutional harmony is in no respect disturbed by it.

The causes of menorrhagia are quite numerous, of which it may be best to make mention of a few: Excess is occasioned by onanism, novel-reading, a constant dwelling of the fancy upon sexual things, and the habitual use of heating beverages. A few other important points have to be added: Under certain circumstances, a profuse flow of the menstrual blood becomes a real physiological necessity to the body; for instance, if a larger supply of nourishment than the body requires for its normal support, causes a real plethora. This can hardly be regarded as a morbid condition. A profuse flow is sometimes occasioned by changes in the uterus, such as acute or chronic inflammation of the womb, or some foreign growth in the uterine cavity. Nursing exerts a very particular influence. As a rule, nursing women do not menstruate; yet it may happen, even in the case of quite healthy mothers, that the menses reappear again permanently, in which case the flow is often *very profuse*. This is not a normal condition, although it does not inconvenience all women.

Menorrhagias that set in when the process of nursing is continued too long, are of an exceedingly threatening character. Accident occurs quite often where the women nurse their children for several years for the purpose of preventing conception, not thinking that by so doing they inflict permanent injury upon their health. We must not forget to record the fact that diseases of other organs, or of the general constitution, exert an influence upon the menses. Diseases such as typhus or scurvy, etc., the influence of heart disease or consumption, and all such diseases which, alter the quality of the blood must be considered.

It is more especially heart disease that causes menorrhagia, so that the heart had better be carefully examined in every case of menorrhagia. Finally, the cessation of the menses, at the critical age, is almost always ushered in by profuse loss of blood.

#### HOMŒOPATHIC TREATMENT.

IPECACUANHA is one of the more generally useful medicines in severe cases of this derangement, as well as in flooding after labor, and may, in most instances, be administered first, unless there are strong indications for a preference being given to any of the others.

*Dose:* Six globules in a teaspoonful of water, repeated at intervals of six hours, until amelioration or change.

SABINA is indicated when the discharge is excessive, of a bright color

and occurs in full-habited females who are prone to miscarry; or when the subjoined symptoms prevail; rheumatic pains in the head and limbs, great weakness; pains in the loins similar to those of labor.

*Dose:* Six globules, as directed for *Ipecacuanha*.

CHINA is of considerable utility where there is great debility in consequence of a more copious menstrual discharge than is natural.

*Dose:* Six globules in a teaspoonful of water, repeated at intervals of six hours, if necessary.

NUX-VOMICA is especially appropriate for the following symptoms:—The discharge being of too frequent occurrence, too profuse, and of too long duration; and when it commonly stops for a day or so and then returns, attended with spasms in the belly; sometimes nausea and fainting, especially in the morning; pains in the limbs; restlessness; irascibility. *Nux-vomica* is especially serviceable when the above symptoms occur in females who are addicted to the daily or frequent use of coffee, liquors and other stimulants, or have been extensively drugged by old-school practitioners.

*Dose:* Six globules in a teaspoonful of water, repeated at intervals of four hours.

CHAMOMILLA is frequently useful when there is a discharge of dark, clotted blood, with severe colic, or pains like those of labor; great thirst; paleness of the face, and coldness of the limbs.

*Dose:* Six globules in a teaspoonful of water, repeated at intervals of six hours, until improvement or change.

IGNATIA is of considerable service in cases resembling the above, when the derangement happens in hysterical or sensitive females, of mild and uncomplaining disposition; or who have had a great deal of trouble.

*Dose:* As for Chamomilla.

VERATRUM is more particularly required for too early or too copious menstrual discharge, always attended with diarrhoea.

*Dose:* Three globules, as directed for *Chamomilla*.

GELSEMINUM is indicated in cases in which there is scarcely an interval between the periods; which are not, however, attended with much suffering; or, the flow having ceased, is brought on again by fright or other mental emotion.

*Dose* Three globules, as for *Chamomilla*.

KREOSOTE will be found useful when the menstrual blood has a decidedly offensive odor, is too profuse, and lasts too long; the abdomen becomes distended before the periods; leucorrhœa, which excoriates the parts, between the periods.

*Dose:* Three globules, as directed for *Chamomilla*.

DIET AND REGIMEN.—Patients who are habitually affected with excessive menstrual discharge should live with great regularity, keeping early hours, taking regular, but moderate daily exercise in the open air (during the intervals) in favorable weather, and partaking of nothing but the most digestible, simple, and unstimulating diet, which, at the same



time, should be of a nourishing and strengthening description. Emotions of all kinds should be avoided, as much as possible; and during the continuance of the discharge the semi-recumbent posture should be retained, and the body kept cool. Neither food nor drink should be taken *hot*; the food should be as cool as it can be relished, or chiefly cold, and the beverage quite cold. In addition to these directions more explicit particulars may be derived from the article on "Eradicative Treatment," at pp. 100—105

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## MASTITIS.

### INFLAMMATION OF THE BREASTS.

The mammæ constituting exclusively a part of the female organism, we prefer treating of inflammation of the mammæ in this place instead of ranging this disease among the diseases of the thoracic organs.

Mastitis proper only occurs during or immediately after nursing. The painful, sometimes rather extensive, hardened swellings of single portions of the breasts, which sometimes occur among unmarried females or married women who are not nursing, especially about the time of the menses, are evidently transitory states of congestion which never terminate in suppuration. The cause of mastitis is always traceable to the impeded discharge of milk. By some cause or other, soreness or a bad shape of the nipples, too feeble drawing by the child, one or more milk ducts become closed, the milk in the corresponding mammary lobule becomes stagnant, and an inflammatory process is the result. Another cause of obstruction of the milk-ducts is the improper manner in which some women wear their clothes, owing to which the breasts either hang too loosely, or a direct pressure is exerted upon them. The doctrine that mastitis can originate in dietetic transgressions or a cold, is a convenient supposition rather than a scientific fact. What happens with other abscesses, is likewise true in regard to abscesses of the mammæ; in some cases they heal rapidly, in other cases they cause vast destructions of tissue. Mastitis is most apt to occur soon after confinement or shortly after weaning the child; mastitis occurring at the latter period is less apt to lead to the formation of abscesses.

**SYMPTOMS.**—The disease never breaks out all at once. Generally women experience some time previous, a gradually increasing pain both spontaneously or while the child is nursing; and a swelling soon develops itself soon after. As a rule the lower or lateral lobes are inflamed, very seldom the upper ones, and still less frequently both breasts. Sooner or later, sometimes in a few days, and at other times in some weeks, the painful spot becomes red and more sensitive, and the inflammation is intense, the whole organism feels the effect of the inflammatory process, and shows its sympathy by febrile phenomena. Soon the infiltrated tissue shows the signs of suppuration, the pus being discharged through a small opening. As soon as the discharge, which is never complete, commences, the pain suddenly ceases and the febrile symptoms abate.

The course of the inflammation depends upon a variety of circumstances. If the inflammation is confined to one lobe, the abscess most

commonly discharges close to the nipple, empties itself very rapidly and heals. If several lobes are inflamed, or the inflamed lobe is situated near the base, the suppuration, swelling and pain continue for a long time; months and even years may elapse before the abscess heals, which discharges through several openings near the nipple. This disorder never lasts less than two weeks, and, under corresponding circumstances, may continue for months even, in its acute form.

The treatment of mastitis includes above everything else a prophylactic treatment which has to be commenced long before confinement, especially in the case of primiparæ (a woman with her first child.) The preservation and proper management of the nipples and of the mammae generally should be a constant subject of our attention. After confinement, if women do not intend to nurse their children, they will have to dispense with liquids as much as possible. Nursing women have to keep the following points constantly in view: the breasts must not be kept too warm, must not be enclosed in tight clothing, and must, by some suitable support, be prevented from dragging down; every time after the baby has nursed, the nipple must be washed, but not be kept moist between the acts of nursing; the excessive use of liquids which women fancy favor the secretion of milk, must be avoided; the child should be put to the breast as seldom as possible, for the more hungry it is the more vigorously it will draw and the more completely the breast will be emptied. At the same time the nipples will not be held so long in the child's mouth, and they will not be exposed so much to the risk of being made sore by the constant nursing. By following these instructions, and more particularly by putting the child to the breast every two hours in the early period after confinement, mastitis will generally be prevented. You must do it.

If the breasts have become hard and painful, the best remedy in the case of lying-in women is *Bryonia*, less frequently *Belladonna*, whereas the latter medicine is better adapted to women who are wearing their infants. We sometimes succeed in dispersing the stagnation of the milk by gently rubbing the indurated portion while the child is nursing. The same good effect is sometimes obtained by causing the milk to be drawn by an older, more vigorous child. In no event should the infant be all at once kept from the breast, even if nursing causes pain. It is only if the pain is very acute, and the hardness considerable that the infant should no longer be put to the diseased breast. *Belladonna* will now have to be administered. As soon as redness has set in, the chances of scattering the inflammation are very slim; in some exceptional cases we may sometimes succeed in effecting this result by a few doses of *Mercurius*. Warm poultices should never be omitted; they sometimes favor the dispersion of the abscess as much as in other cases they hasten the process of suppuration. *Hepar sulphuris* will promote the discharge of the pus. A great many authorities teach to open the abscess at an early period in order to prevent the further spread of the inflammation. We doubt whether such a proceeding is justified by corresponding results; after opening the abscess we have often seen the inflammation spread much more rapidly; in the most tedious cases of mastitis, the abscess had been opened in accordance with

his suggestion. In a fortnight at latest the discharge of pus ceases under the use of a few doses of *Mercurius*, and the sore heal

### HOMŒOPATHIC TREATMENT.

*BRYONIA* is the principal remedy in this affection, before the inflammation becomes fully developed, especially when the breasts are hard, red, tense, and tumefied, and feel heavy; and when there is some degree of fever.

*Dose:* Of a solution of six globules to four teaspoonsful of water, give a teaspoonful every four hours.

*BELLADONNA* is, however, required when the inflammation is more intense, and the erysipelatous appearance of the skin is clearly defined usually running in radi; and is, in such instances, usually sufficient to subdue all inflammatory symptoms.

*Dose:* As directed for *Bryonia*.

*SULPHUR* may be required, more especially for the treatment of scrofulous subjects, and when the previous administration of *Belladonna* has been productive of partial or limited improvement, an evident susceptibility remaining, even if the active inflammatory symptoms have been allayed. It is also useful when, after the bursting of an abscess in the breast, the cavity is slow in healing up, and the discharge excessive.

*Dose:* As for *Bryonia*.

*GRAPHITES* should be employed, particularly in scrofulous subjects where the breasts are in such bad condition from previous inflammations and abscesses, that the milk cannot flow, and its retention threatens inflammation and abscess. *Graphites* will in most cases, ward off the difficulty. Should *Graphites* fail, *Phytolacca* should be tried, no other remedy being more prominently indicated.

*Dose:* As directed for *Sulphur*.

*PHYTOLACCA DECANDRIA* will be found to be a most valuable remedy in many cases; more particularly where the breasts are hard from the commencement of the disorder, sensitive to touch, and more or less painful. It will also prove useful for "lumps" in the breasts.

*Dose:* As directed for *Bryonia*, use also as an external application.

*MERCURIUS* may be required after any of the foregoing medicines, when, notwithstanding the previous treatment, and the reduction of the inflammatory symptoms, a degree of induration still remains.

*Dose:* As directed for *Sulphur*.

*PHOSPHORUS* is indicated when symptoms of threatening formation of matter (abscess), such as increase of pain, with transitory chills, and throbbing in the breast ensue. Its immediate employment, under such circumstances, will often succeed in speedily relieving pain, and preventing the ripening and bursting of the abscess. It is also indicated in severe cases where there are already fistulous ulcers formed, of blue appearance, and having callous edges; and the patient has hectic fever and night sweats.

*Dose:* Three globules every six hours, until relief is obtained.

## CARCINOMA UTERI. CANCER OF THE UTERUS.

In, by far, the majority of cases, this disease occurs beyond the age of forty, and is very seldom met with in women of a less advanced age. Feeble as well as robust, married as well as unmarried women are attacked by this terrible destroyer. Cancer of the uterus is one of the most frequently occurring forms of carcinoma, and not unfrequently runs its course as a solitary cancer. It is only in rare cases that it breaks out in addition to cancerous degenerations of other organs.

Cancer of the uterus is frequently mistaken, at the commencement, for menstrual disorder, leucorrhœa or chronic inflammation of the womb. The first symptoms usually are menstrual derangements, cessation or a more frequent return of the menses, or in the place of the menses we have irregular hemorrhages and leucorrhœa. The mistake is made the more easily, if the patient has not yet reached the critical period, so that these changes may be set down as results of a natural cessation of the monthly secretion. If the patient has passed through the critical period, a sudden flow of blood takes place, at first resembling the menstrual flow, but soon increasing to a true hemorrhage. In the beginning the patient often complains only of a feeling of weight, drawing in the pelvis, a pressing towards the sexual organs, or the pains are excited by bodily motion, a concussion, sexual intercourse, touch. An examination shows the vaginal portion harder than in the normal condition, of unusual resistance, swollen, misshapen, rugged and knotty, sensitive to pressure and readily bleeding. In the course of the disease, pains set in which are, at first, only vague, and occur only now and then, but afterwards become more severe, and finally, especially at night, exceedingly violent, pressing, stinging, lancinating, burning, not confined to the region of the uterus, but spreading to the small of the back and thighs. Characteristic are the more or less violent, burning and stinging-boring pains over the pubic bones and in the small of the back, along the hips and thighs, interfering with walking, and even sitting; very often a burning pain is continually felt deep in the pelvis, accompanied by fugitive stitches darting through the uterus. The neighboring lymphatic glands are generally larger and painful. At the beginning of the trouble, a serous or slimy secretion flows from the vagina, having but little smell; more usually the discharge is copious, of a brownish-red, suspicious-looking color, having a horrid smell and excoriating the skin. The bleeding becomes more and more frequent and copious, the blood being mixed with detached portions of tissue. These hemorrhages consume the strength of the patient in a very short time. At this stage of the disease, the ichorous dissolution of the cancer progresses very rapidly. The disease generally lasts for years, calculating from the first manifestation of distinct symptoms, and without allowing for the influence of special circumstances, such as confinement, which is one of the most pernicious occurrences that can happen to a woman afflicted with cancer of the womb. It is inconceivable how it is possible for the organism to bear up for so long a time under a destructive malady, like cancer, without perishing.



## TREATMENT.

No more than we reject the possibility of a cure of cancer generally, do we believe that cancer of the uterus is an incurable disease, although it is difficult to obtain certainty in this respect.

**KREOSOTUM.** When the following symptoms are present: Obstinate leucorrhœa during frequently recurring losses of blood, with aching or pressing pains, and a gradually appearing fetid discharge of a serous fluid or a bloody ichor. This is attended with burning or lancinating pains in the small of the back and loins. When standing she experiences a sensation as of a weight in the pelvis; coition is painful; all the symptoms are worse at the time of the menses. Electrical stitches in the vagina, as if proceeding from the abdomen, causing the patient to start; voluptuous itching in the vagina, with burning and swelling of the external and internal labia; ulcerative pain during coition; the menses appear from four to ten days too soon, and continue for days, with discharge of a dark, coagulated blood, pains in the small of the back, and subsequent discharge of a pungent and bloody ichor; gnawing, itching and smarting in the parts; the menses stop for hours and days, but afterwards return again in a more fluid form and attended with violent colicky pains. The pressing downwards and the abdominal spasms continue after the menses, more especially in the groin and pelvic region; bleeding from the uterus and a continual corrosive leucorrhœa are not wanting. The pains are worse at night. Sensation of fainting on rising, with a peevish and desponding mood, and livid complexion.

**ARSENICUM ALBUM** has been given with excellent success in carcinoma uteri. Arsenic can only be resorted to after the whole organism reflects the picture of a cancerous disease. However, it only palliates the severe pains and the sleeplessness, and perhaps modifies the profuse metrorrhagia, which occurs every now and then in the course of the disease.

**NITRI ACIDUM** is indicated in carcinoma uteri, as it is in many other inveterate dyscrasic conditions of the organism. The most important symptoms are: Irregular menses, they sometimes remain suspended for weeks and then appear again at short intervals; between the menses copious leucorrhœa of a badly-colored, brownish appearance and offensive odor. The patient looks worn, feels nervous and is depressed in spirits. Obstructions in the portal circulation, such as hemorrhoids, indicate this drug. Acidum nitricum can, however, only be used as an intercurrent remedy at the commencement of the disease; if ichorous dissolution has commenced, this drug is no longer of any use.

## CARCINOMIA MAMMÆ. CANCER OF THE BREAST.

Next to the uterus (womb) the breasts are the most frequently attacked by cancer. The causes of this disease can scarcely ever be determined with certainty. The influence of depressing emotions which are so easily and so commonly succeeded by cancerous degenerations, or diseases, is a much more evident source of the difficulty than the belief of some that it is the result of a bruise, from a blow or contusion.

Cancer of the breast most commonly occurs between the ages of forty and fifty, about the period which is generally designated as a change of

life. Unmarried women or women who have not had children seem to be more liable to it than married women with children. Before and after this period, it is proportionally a rare occurrence.

The commencement of the disease is scarcely ever marked by peculiar morbid phenomena; the patients generally do not notice anything out of the way until a tolerably large tumor is perceived in the breast. It is at first round, smooth, movable, grows with more or less rapidity, and loses its mobility in proportion as it increases in size, and its surface becomes more uneven. At first it is most commonly deep-seated and gradually grows towards the surface, is sometimes entirely painless or becomes, painful only at the time of the menses and when receiving some mechanical injury. If the cancer reaches the skin, it coalesces with it, after which the pains are almost constantly felt. At the same time the disorganizing process extends to the deeper tissues, and at an early stage the axillary (arm pit) and other neighboring glands become involved. The patients now commence to feel constantly or at intervals, and particularly at night, lancinating, boring pains in the affected part which very soon become unbearable. The assimilative functions begin to suffer; the patients have a pale yellowish-gray appearance, the spirits are very much depressed. A characteristic sign is the gradual effacement and finally the complete retraction of the nipple which discharges either spontaneously or on pressure a turbid, serous fluid. At the place where the cancerous growth first became interwoven with the skin, the latter by slow degrees loses its healthy color, and finally breaks. An irregularly-shaped ulcer forms, showing a disposition to penetrate to the subjacent tissues; the edges of the ulcer are infiltrated, have a sickly color and an uneven base, and secrete at first a thin, serous and afterwards an ichorus, purulent, bloody, and most commonly very fetid fluid. If the disease runs a slow course, the incipient ulcer often heals for a time, but again breaks open at a later period; if the disease runs a rapid course, spongy and readily-bleeding excrescences are apt to shoot up from the bottom of the sore. If larger vessels become necrosed, hemorrhages take place which are sometimes very profuse, at other times trifling. The further course of the disease which, having arrived at this stage, always terminates fatally, depends upon the extension of the cancer, upon the invasion, by the carcinomatous process, of internal organs, upon the importance of the hemorrhage and upon the loss of fluids in consequence of the ichorus discharge.

The duration of the whole disease varies considerably, ranging from two to twelve and even more years. The younger the patient, the sooner she will succumb to the disease, and the more sudden the cancerous growth, the sooner it will destroy life. The prognosis is very bad with scarcely an exception.

In many respects the diagnosis is liable to difficulties, because various kinds of benign tumors may recur in the breast. An incipient cancer cannot always be recognized as such, though it may grow rapidly and be painful; these two conditions never occur in the case of benign tumors. At a later period the diagnosis is determined by the retraction of the nipple, the fluid which it discharges, the rugged unevenness and immobility of the swelling, the participation of the neighboring glands in the

disease, the failing of the whole organism without any increase of the secretory products. Nevertheless there occur many cases of cancer, the true nature of which remains for a long time undetermined and is clearly revealed only after the disease has run a long course.

Cancer of the breast is generally considered a surgical disease; it is supposed by most authors that internal treatment cannot reach it. The disease, at least in its incipency, is considered purely local, and an operation the only cure. For these and other reasons, having given you the means of selecting an intelligent and honest physician and surgeon, we unhesitatingly commend you to his care and here offer no treatment.

#### HOME REMEDIES.

Take the juice of Sheep Sorrel, let it evaporate on a pewter plate to the consistence of a thick extract; apply this over the cancer. It is very painful but good.

ANOTHER. Take equal parts of Sheep Sorrel, Poke Leaves and Yellow Dock Root, beat them up in a mortar with a little water; squeeze out all the fluid; place it on a lead or pewter plate, and let it evaporate until it forms a thick extract. Apply to the cancer. This is a noted cancer cure.

Again: Make a ley of the ashes of Red Oak Bark; boil down until it is as thick as molasses, and cover the cancer with it. In about an hour afterward, cover it with a coat of Tar. Remove this in a few days, and if any protuberances remain in the wound, apply more of the Oak Bark Potash and the Tar plaster, and so on until the cancer is cured. Heal the ulcer with some common salve.

## Part Ninth.

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### DISEASES OF THE RESPIRATORY ORGANS.

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## CHAPTER XX.

### DISEASES OF THE LARYNX AND TRACHEA.

(WINDPIPE.)

#### CATARRH, OR COMMON COLD. CATARRHAL FEVER.

This term is given to an affection, which consists of a mild degree of inflammation of the lining membrane of the nostrils and windpipe, and occasionally also of the ramifications of the latter, induced by exposure to sudden changes of temperature, or to a damp or chilly atmosphere with insufficient clothing, particularly as regards children.

**SYMPTOMS.** This complaint is characterized by slight fever, impaired appetite, obstruction of the nose, sneezing, unusual languor, pains in the head, or in the back and extremities, and subsequently hoarseness or cough, generally preceded by transitory chills or shiverings; there is also a slight degree of wheezing and difficulty of breathing. When the disease is confined to the nose and sinuses, it is termed **A COLD IN THE HEAD.**

#### PREMONITORY STAGE.

#### ·HOMEOPATHIC TREATMENT.

**CAMPHOR** (*concentrated tincture*) is frequently effective in arresting the development of incipient cold or influenza, particularly if the exciting cause, to which it is immediately traced, has been wet feet. The symptoms which usually identify the propriety of resorting to *Camphor* under these circumstances are as follow: unusual weariness, heaviness, and general uneasiness, attended with shivering and dryness or coldness of the skin, and symptoms of approaching fever.

*Dose:* One drop of the concentrated tincture on a small lump of pure loaf sugar every three hours, until three doses have been given.

**NUX-VOMICA** is the most generally useful, particularly when the symptoms have accrued after exposure to a draught, or prolonged exposure, in winter, to a cold, dry, frosty atmosphere.

*Dose:* Six pills in a teaspoonful of water at night, repeated, if necessary, after an interval of six hours.

**CHAMOMILLA** is preferable when a copious outbreak of perspiration has been suddenly checked by a current of dry, cold air, or by a sudden transition from heat to cold. In the case of children, and highly sensitive females, this remedy is more especially useful.



*Dose:* Six globules in a teaspoonful of water, as directed for *Nux-Vomica*.

*BRYONIA* should be employed when the symptoms of incipient catarrh have been excited by prolonged exposure to a cold easterly wind; or when in adults, who are subject to liver complaints or to rheumatism, the natural sweat has been suddenly suppressed, whilst they were somewhat heated.

*Dose:* Six pills in a teaspoonful of water, repeated, if requisite, after the lapse of twelve hours.

*DULCAMARA* is the most appropriate remedy to be taken by those who are subject to severe coughs, or to sore throat, whenever they are exposed to a close, *damp* atmosphere (either during the day or late in the evening), or after getting the feet wet. Its alternate administration with *Mercurius* is sometimes of great advantage. In other cases when *Dulcamara* fails to arrest the symptoms it should be promptly followed by *Mercurius*.

*Dose:* As for *Nux*. If in *alternation* with *Mercurius*, six pills, first of the one then of the other, in a teaspoonful of water, at intervals of four hours between them.

*ARSENICUM* is especially appropriate for the treatment of ill-effects resulting from a chill whilst bathing, or from long-continued immersion in the water, either voluntary or otherwise. *Chills in the stomach*, produced by partaking of raw, cold fruits, or by eating ices, or drinking very cold water when heated, are also most readily counteracted by this medicine.

*Dose:* Four globules in a teaspoonful of water, repeated, if necessary, every three hours.

*PULSATILLA* should, however, be preferred under similar antecedent circumstances, if drinking whilst heated, or eating cold fruit, ices, etc., has caused the indisposition.

*Dose:* Six pills as directed for *Nux*.

#### FEVER STAGE.

*ACONITUM* is one of the principal remedies in feverish attacks provoked by cold, and particularly from exposure to a dry, cold wind, or to a draught, when hot, dry skin is present, or general shivering chills, alternating with burning heat of the surface; great thirst, especially towards evening, with a sensation of dryness, and roughness or scraping, slight burning, and sensation of excoriation in the upper part of the windpipe, or even throughout the whole of the chest, which gives rise to an incessant short, dry, hollow cough (more of a hoarse or rough description at night); restless sleep.

*Dose:* Six pills every two hours in a teaspoonful of water.

*BRYONIA* when there is an excessively *dry, hollow* cough accompanied by tenderness of the upper part of the windpipe on pressure, inclination to vomit, and pain in the chest, as if it would be torn asunder; severe headache, aching pains in the limbs, increased by the slightest movement, violent cold in the head.

*Dose:* Four pills in a teaspoonful of water, every two hours.

**NUX-VOMICA.**—Dry cough, particularly in the morning, and sometimes during the day, rarely during the night; occasionally a small quantity of adhesive phlegm is with difficulty expectorated after a fit of coughing; and the paroxysms are frequently attended with a painful sensation in the region about the navel, as if arising from the effects of a bruise or blow. This remedy is further of great utility in catarrhal fever, with disposition to chilliness or wandering fever-chills, worse during movement, coming on and gradually increasing in the after part of the day, and alternating with flushes of heat. Warmth and absolute rest mitigate these symptoms.

*Dose:* As for *Bryonia*.

**CHAMOMILLA.**—In the treatment of children, this medicine is generally preferable to *Nux-Vomica* in arresting the attack. It is extremely valuable in restoring the suppressed perspiration, and removing the following symptoms: colic, with pains in the head, ears, and teeth, thirst, and ill humor, and impatience; dry heat of the skin, or chilliness in any part of the body which may happen to be uncovered for a short time, or on lifting up the bed-clothes; burning heat in one part (as for instance one cheek) and chilliness in another; severe, dry cough, especially at night, excited by tickling in the upper part of the windpipe.

*Dose:* As for *Aconite*.

**BELLADONNA** is indicated when there is a throbbing, bursting headache, attended with tendency of blood to the head, and increase of the pain from movement or exposure to cold air, pain and heat in the head, eyes, and nose; cough at night.

*Dose:* As for *Bryonia*.

**MERCURIUS**, when the lining membrane of the eyelids, nostrils and air-tubes is highly irritated, and gives rise to copious shedding of tears, cold in the head, and cough with profuse expectoration; headache, or feeling of tightness and fullness in the head, with pulsation extending to the nose; pains in the limbs and joints, accompanied with profuse sweating, which affords no relief.

*Dose:* As for *Bryonia*.

**SEPIA** is indicated in cases of catarrhal fever, with shivering chills on every movement in a warm room, rarely alternating with heat; nocturnal spasmodic cough, with shortness of breath and inclination to vomit; cold in the head, pain at the back of the head.

## PREDISPOSITION TO COLD.

### PRECAUTIONARY MANAGEMENT.

Some individuals, particularly among those of the fair sex, are tormented with an extreme degree of susceptibility to cold, the best corrective of which is, to rub the *throat, chest*, and indeed the whole body, every morning with a wet towel, until a glow of heat is produced,—drying one part before another is commenced;—also to acquire a habit of going out *every day*, provided there is no inherent predisposition to pulmonary consumption; *extremes*, either of heat or cold, should at the same time be avoided, and care taken, when the body is heated, to let it cool gradually.

The shower-bath is another useful means of overcoming an unusual susceptibility to cold. It should, generally speaking, be begun in summer and used tepid at first.

#### ACCESSORY MEASURES.

In many instances catarrh is carried off, or runs to a salutary termination, in a day or two; and this desirable result is frequently obtained by having *timely* recourse to the simple expedient of remaining a little longer in bed, and encouraging a gentle sweat by drinking a warm demulcent fluid, such as gruel; bathing the feet and legs in warm water, at the temperature of about 98 to 100 degrees Fahrenheit, is also a useful auxiliary mode of restoring perspiration, but the patient should go to bed immediately afterwards. Very robust persons who are accustomed to be in the open air in all weathers, but who have caught cold after having overheated themselves, will frequently prevent any bad effects by drinking one or two glasses of cold water on going to bed. Others again, recover quickly, especially when the cold is confined to the head, by totally abstaining from all fluids for forty-eight hours, or by taking a tablespoonful of fluid, thrice a day only (at breakfast, dinner, and tea), for seventy-two hours.

#### INFLAMMATION OF THE LARYNX.

##### OR UPPER PART OF THE WINDPIPE.

The disease consists in a suppurative inflammation, having its seat in the lining membrane of the upper part of the windpipe, or the connecting cellular tissue between it and the subjacent parts. The disease bears a considerable resemblance to croup, of which it very generally forms a part; but occasionally the inflammation is exclusively restricted to the upper part of the windpipe; and it is a frequent cause of a fatal termination in scarlet fever and smallpox. It is distinguished from croup by a constant hawking (which the patient voluntarily exercises in order to clear the air-passage) rather than a violent and involuntary cough,—and by the character of the expectoration, which consist of a thick, tenacious phlegm rather than of a coagulable and membranaceous-looking exudation.

**SYMPTOMS.** The invasion of the disorder is announced by the usual signs of inflammatory fever; the voice soon becomes hoarse and inarticulate, whilst a painful sense of constriction is experienced in the throat; the breathing is laborious and shrill during inspiration; the upper part of the windpipe is extremely sensitive to the touch, so that the slightest pressure against it either externally, by the hand, or internally, from the performance of the act of deglutition, is productive of the most distressing spasms, which threaten death from suffocation. The heat of skin is great, the pulse rapid and hard, the thirst considerable, but incapable, of being satisfied from the suffering that is occasioned by the attempt. On examining the throat, it is often found to present a red, inflamed, and turgid appearance; in some cases the epiglottis (the small, oblong body, attached to the root of the tongue, which protects the opening of the windpipe) is involved, and the motions of the tongue are thereby rendered painful and difficult. As the disease gains ground, the face becomes swollen, and sometimes livid, the eyes protruded as in threatened strangulation, and life is speedily cut short by suffocation.

**RESULTS.** The disease, if not arrested, occasionally terminates fatally within a few hours, or in a day or two at the farthest. It ought not to be treated by the non-professional reader.

#### HOMŒOPATHIC TREATMENT.

**ACONITUM** must immediately be exhibited when the signs of inflammatory fever declare themselves, and continued until it gives evidence of having effected an abatement of the fever.

*Dose:* Of a solution of six globules to two tablespoonfuls of water, give a teaspoonful every half hour.

**SPONGIA** should in the generality of cases, be administered with *Aconite* every two hours after the last dose of *Aconite*, or as soon as the breathing becomes shrill, and the pain and sensibility in the upper part of the windpipe are more decided, with increase of hoarseness and difficulty of articulation.

**HEPAR-SULPHURIS** should be given six hours, or sooner if needful, after the last dose of *Spongia*, when the latter remedy appears to have done all that it is capable of effecting; in which case, this medicine will either be adequate to complete the cure, or at all events to bear the patient out of danger, and thus to leave more leisure for appropriate selection in treating the remaining symptoms. *Hepar-s.* may, however, be selected to follow *Aconitum* in preference to *Spongia*, if the fever and burning heat of the skin continue notwithstanding the previous administration of *Aconitum*.

**BELLADONNA** has likewise rendered very appreciable service, especially when there were considerable heat of the skin, much thirst, but complete inability to swallow liquids, owing to the spasms which the attempt occasioned; further, when, on looking into the throat, it was found to present an inflamed and swollen appearance. *Belladonna* is, however, not to be administered in cases in which it has previously been employed; as, for instance, if the affection of the windpipe occurred immediately after an attack of pure Scarlet-Fever.

#### HOARSENESS.

Hoarseness, or roughness of the voice, arises from some morbid condition of the upper part of the windpipe. In the majority of cases the seat of the affection is in the mucous membrane which lines that part, which is extremely liable to be affected by the common causes of Catarrh; hence it is a frequent accompaniment of the latter disorder.

#### HOMŒOPATHIC TREATMENT.

**PULSATILLA** is indicated by almost complete loss of voice, particularly when accompanied with loose cough, or thick, yellow discharge from the nostrils.

*Dose:* Six pills in a teaspoonful of water night and morning, but if, after the course of a week's treatment, although much improved, the case be not cured but appears to have become stationary, proceed with one or other of the following medicines, according to symptoms.

**MERCURIUS.**—This remedy will be found useful in removing any



symptoms remaining after the above, but it is to be preferred should the hoarseness, from the commencement, be attended with thin discharge from the nose; and also when a sensation of burning or tickling is complained of in the upper part of the windpipe, with the characteristic indication of *Mercurius*, namely, a disposition to *profuse sweating*, especially at night.

*Dose:* Six pills in a teaspoonful of water, repeated at intervals of twelve hours, until amelioration or change.

**NUX-VOMICA.**—Hoarseness, accompanied with a dry, fatiguing cough, worse in the early hours of the morning, with dry obstruction of the nose.

*Dose:* As for Pulsatilla.

**RHUS-TOXICODENDRON.**—Hoarseness, accompanied with sensation of excoriation in the chest; oppressed breathing, with frequent and violent *sneezing*, unaccompanied by cold in the head, but occasionally by a great discharge of phlegm from the nose.

*Dose:* As for Mercurius.

**STANNUM** is more particularly required when symptoms such as the following are present: cough, with copious expectoration of a greenish-yellow color, and of a *sweetish* or *saltish* taste, attended with great weakness and disposition to sweats; soreness at the chest as from internal excoriation; feeling of weakness or sinking in the chest, as if it were empty, particularly after expectorating, or even after speaking; or dry, shaking cough, worse at night or towards morning, excited or aggravated by speaking or laughing, and occasionally followed by vomiting of food.

*Dose:* Four pills as directed for Sepia.

**LYCOPodium** is very efficacious in obstinate coughs which are worse at night, and are attended with expectoration of tenacious phlegm, and sometimes vomiting; paleness of the face, emaciation, pains and oppression in the fore part of the chest, flatulence, ill-humor, etc.

*Dose:* Six pills in a teaspoonful of water, morning and evening, until change.

**PHOSPHORUS** is appropriate to the following symptoms: *dry cough* excited by *tickling* irritation in the throat or chest, or by laughing, talking or drinking, or by cold air, and accompanied with pricking in the windpipe; hoarseness, or pains in the chest as if from excoriation; cough with hoarseness, fever and depression of spirits, sometimes with apprehensions of death; dry-sounding cough, followed by expectoration of viscid or bloody phlegm, and attended with oppressed breathing and livid hue of lips and face; cough occurring in consumptive habits.

*Dose:* Six pills in a teaspoonful of water, night and morning, until change.

**ARNICA** is of great value in coughs attended with bleeding from the nose and mouth; headache, pricking in the chest, rheumatic pains in the loins and extremities, and soreness or pain, as from a bruise, in the chest and belly.

*Dose:* As for *Phosphorus*.

**SPONGIA.** In acute inflammation of the lining membrane of the air-tubes, this remedy is often of essential service; but it is of equal utility in the chronic variety, when the chronic symptoms prevail: cough with mucopurulent expectoration, emaciation, redness and deformity of the points of the fingers, lividity and incurvation of the nails, hectic fever.

*Dose:* Four pills as directed for *Lycopodium*.

### ALLOPATHIC TREATMENT.

The treatment of Catarrh or common cold is given in chapter X under the head of Catarrh, and in chapter XXI under the head of Acute Bronchitis. Sub-Acute Laryngitis often occurs in colds either alone or with Coryza (acute catarrh of the nose), or with Acute Bronchitis, but may occur alone. The inflammation is of a low grade. There is either hoarseness or loss of voice (aphonia), and a hoarse cough. In children spasm of the larynx is apt to be excited, known as false croup, but this is rarely the case in the adult. Besides the treatment as recommended for Acute Bronchitis, strong irritations over the larynx (Adams apple) is useful. This is best made by the frequent application of Tincture of Iodine. When the coloring of the skin is an objection the Decolorized Tincture of Iodine may be used, or a blister can be applied over the larynx.

The inhalations of warm vapor is especially useful in all inflammations of the larynx. The steam from a solution of Chloride of Ammonium from a croup kettle, or a spray producer may be inhaled with benefit. Glycerine may be applied freely to the epiglottis, and orifice of the larynx with benefit in some cases. It should run into the larynx. A large camel's-hair brush should be used. Should the fever run high, and the pulse rapid, great benefit will be derived in this as in other catarrhal inflammations, by giving Tincture of Aconite in doses of half a drop to a drop every half hour until an impression is made on the fever, and then given one or two hours apart. It may be used without interfering with other treatment. A couple of drops of Tincture of Belladonna may be advantageously given with each dose of Tincture of Aconite, especially when the secretion of phlegm is profuse. Tincture of Iodine dropped in hot water will yield a vapor which may be inhaled frequently during the day. The vapor may be made to ascend through a funnel made of stiff paper, and so conveyed to the mouth.

Chronic hoarseness of the throat occurs most frequently in persons of sedentary habits in a somewhat debilitated state of health. The indications are in the first place for life in the open air, and less at the desk. These persons also need tonics, and possibly an alterative. Such a medicine we have in the Syrup of the Iodide of Iron, which may be given in doses of thirty drops in water three times a day. An equally servicable, and more elegant preparation is the following: Take of Iodine of Potassium five drams, Pyrophosphite of Iron one dram, water one ounce, Simple Syrup three ounces, Spirits Peppermint half a dram. Dissolve the Iron in half the water and add the Syrup; dissolve the Iodide of Potassium in the remainder of the water, mix and add the Spirits of Peppermint. Dose a teaspoonful three times a day. In robust persons the Iron may be omitted. Other tonics which may be useful are Citrate of Iron and Quin-

ine, in doses of from three to five grains three times a day; dissolved in water or Syrup of Orange. Two or three grain doses of Citrate of Iron and Strychnine given in the same way may be found useful in restoring the general health. Three to five drops of Fowler's Solution may be given often, with advantage, with the above remedies. A dram and a half to two and a half is proper for a four ounce mixture. Pills of the Phosphide of Zinc, and Extract of Nux-vomica will often prove servicable.

The following mixture of Iron may be given in connection, if Iron seems required: Take of Pyro-phosphate of Iron a dram, Water sufficient to dissolve, Syrup of Ginger sufficient to make four ounces. Mix. Dose a teaspoonful three times day.

Nervous hoarseness is often relieved by from five to ten grains each of the Bromide of Ammonia and Bromide of Potassium, in water, three times a day. Atropine, in doses of a hundred and twentieth to an eightieth of a grain twice a day, will often prove effectual in relieving this form of hoarseness.

Counter-irritation, by means of Tincture of Iodine, or Decolorized Tincture of Iodine, applied by a camel's hair brush; or a liniment of equal parts of Croton Oil, Turpentine and Sweet Oil; or by the use of Ointment of Tartar Emetic (made by mixing two drams of Tartar Emetic with an ounce of Lard) rubbing it well into the skin twice a day.

Applications to the diseased surface, the vocal cords and interior of the larynx can best be made by inhalation. Iodine may be inhaled by dropping the Tincture into hot water. Carbolic Acid may be combined with Tincture of Iodine in the proportion of half a dram to a dram to half an ounce; a sufficient quantity of Iodide of Potassium should be added, to prevent the Iodine from precipitating.

Iodoform vapor may be inhaled with benefit often. The vapor may be generated by heating a plate or saucer with some of the powder upon it, and may be conducted to the mouth by a stiff paper funnel. Bromine vapor may be inhaled by warming a vial having a few drops of the liquid, and holding to the mouth.

A solution of Nitrate of Silver containing ten to twenty grains to the ounce, is, perhaps, the most useful of all the local applications. It should be applied with a brush or probang with the aid of a laryngoscopic mirror.

Various substances, besides the above, may be used by means of the steam atomizer or the air spray producer, but they have no special advantage over the methods given.

Persistent cases of excessive hoarseness (chronic laryngitis) depend, generally, upon tuberculosis or syphilis. If ulceration has gone on to any extent, the hoarseness or loss of voice is incurable. The former disease is treated of in chapter XXI, in the article on Consumption. The latter disease does not come within the scope of this work.

This trouble must not be confounded with the hoarseness which exists in Chronic Pharyngitis (inflammation of throat) frequently called clergyman's sore throat, which is treated of in Chapter XI.

The treatment of this form of Catarrh (sub-acute Laryngitis) in children does not differ materially from its treatment in adults. The child in the majority of cases, should be kept within doors until the inflammation

—cough and hoarseness—disappear. Then he may be gradually accustomed to his out door play, by beginning first at mid-day. In fact some children may be permitted to go out for a little while in the middle of the day, during the course of the attack. The clothing should be warm enough to keep the skin warm and moist. Flannel should be next to the skin. A stimulating application should be made to the neck, as rubbing the skin thoroughly and often with Turpentine, or Turpentine and Spirits of Camphor, and a flannel saturated with Camphorated Oil, (Camphor one scruple, Olive Oil one ounce), may be worn around the neck.

Cough should be relieved by the use of Paregoric, in doses suited to the age of the child, with an equal quantity of Tincture of Hyoseyamus, from ten to thirty drops of each can be given to children two to six years old in Syrup, or Syrup of Squills or Ipecacuanha.

A hot foot bath at night will be useful. The cough mixture, or ten to thirty drops of Paregoric, or three grains of Dover's Powders (to a child three to five years old), should be given upon going to bed.

If the disease becomes chronic, as in the adult, it probably depends upon tuberculosis or syphilis, and is amenable to treatment proper for these diseases.

Should the chronic affection be of scrofulous origin, benefit will result from the internal use of the following mixture: Take of Iodine of Potassium a dram and a half, Pyrophosphite of Iron half a dram, Simple Syrup four ounces, Spirits Peppermint half a dram. Of this Syrup a teaspoonful may be given three times a day. Cod Liver Oil will be useful. The diet should be good, the clothing flannel and warm. The Tincture of Iodine should be applied upon the neck over the larynx every day, or if the neck becomes very sore every other day.

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## COUGH.

**SYMPTOMS.** Forced and audible expiration, with or without fever: either dry or accompanied with expectoration.

Cough, although not dangerous of itself, may become so, or form an important feature of other diseases. As a precursor of consumption it is too often neglected.

**CAUSES.** It may arise from an irritation of the air-passages or lungs, from disease of these organs, or from cold or other causes, or be merely sympathetic — or the consequence of derangements of other important organs.

We purpose here to treat more particularly of simple *mucus* or *moist* and *dry* cough.

### NERVOUS COUGHS.

Obstinate nervous coughs occurring in highly-irritable, nervous, and hysterical subjects, and which are generally *dry*, or attended with scanty and difficult expectoration, consisting of a little *clear phlegm*, are often relieved by change of air and scene, or even by exhilarating or active occupation, when medicinal resources fail to ensure a permanent cure.



## COUGH.—TREATMENT.

ACONITUM is indicated by violent short cough, with *quick hard pulse* and *feverish heat*; pricking in the chest when coughing, or during inspiration.

*Dose:* Six pills in a teaspoonful of water.

DULCAMARA. The following are indications for the selection of this remedy: *moist* or loose cough, with copious expectoration after exposure to a cold, damp atmosphere; or cough with hoarseness and copious secretion of phlegm in the ramifications of the windpipe, sometimes accompanied by expectoration of bright-colored blood during the night; barking, shaking, cough, increased or excited by taking a deep breath.

*Dose:* Of a solution of six pills to two tablepoonsful of water, give a teaspoonful every three hours.

BELLADONNA. *Short, dry, barking (spasmodic, catarrhal, or nervous), cough at night, in bed, and also during sleep, renewed* by the slightest movement; dry cough day and night, with irritation or tickling in the pit of the throat, or sensation as if a foreign body were in the windpipe, or as if dust has been inhaled; *spasmodic* cough, which scarcely allows time for *respiration*. This medicine is also sometimes useful in cough with rattling of phlegm on the chest, pricking in the front or sides of the chest, and expectoration of thick, white phlegm, coming on especially after meals; *lancinating pain in the belly*; hoarseness, redness of the face, headache, sneezing after coughing, and pain in the nape of the neck.

*Dose:* Dissolve six pills in four tablepoonsful of water, and give a teaspoonful of the solution every three hours; but if only *partial* relief has resulted, within three hours after the fourth dose, pause three hours longer, and proceed with the next medicine.

HYOSCYAMUS frequently answers when *Belladonna* has only afforded partial relief, and may be preferred to that remedy when the dry, tickling, nocturnal cough is mitigated for the time by sitting up in bed; also when there is mucus rattling in the throat.

*Dose:* A solution of four globules, as directed for *Belladonna*.

IGNATI-AMARA is preferable to *Belladonna* and *Hyoscyamus* in very tickling coughs, which continue day and night with equal severity, and are accompanied by a running cold in the head. *Ignatia* is, moreover, especially indicated by the subjoined symptoms,—shaking spasmodic cough, or *short, hacking cough*, as if arising from the presence of dust or feather-down in the throat, which becomes aggravated the longer the paroxysm of coughing continues; dry, tickling cough with cold in the head, occurring both day and night. This remedy is, further, particularly efficacious, when the attacks of coughing become *aggravated* after eating, or on lying down *at night*, or on rising in the *morning*, and when the patient is of a mild and placid temper, or subject to alternations of high and low spirits.

*Dose:* As for *Belladonna*.

NUX-VOMICA.—This is a valuable remedy in many cases either of a catarrhal or nervous character, and is *particularly efficacious* where there is a *dry, hoarse, fatiguing, and sometimes spasmodic cough* which occurs in an aggravated form in the *MORNING*, and occasionally, also towards evening; or which recurs more or less during the day, but relaxes again

at night, and is then occasionally supplanted by oppression at the chest on lying down or on awaking during the night, accompanied with a feeling of heat, and dryness in the mouth; if there be any expectoration, it consists merely of a *little phlegm, which is detached with great difficulty*. The cough is generally excited by a disagreeable *tickling* or scraping, with a feeling of roughness or rawness in the throat, sometimes attended with HOARSENESS and feeling of roughness in the chest, but more frequently with severe headache, or pain as if from a *blow or bruise in the pit of the stomach under the false ribs*; it is frequently aggravated after meals or by movement, not unfrequently, also, by reading or meditation, and is occasionally followed by vomiting.

*Dose*: Six pills in a teaspoonful of water, every three hours.

**PULSATILLA**.—Severe shaking, catarrhal or nervous spasmodic cough, worse *towards evening* and *at night*, frequently followed by vomiting; sensation of *suffocation*, as if from the vapor of sulphur; increase of cough when in a recumbent posture; cough which is at first dry, then followed by *copious expectoration* of yellowish or whitish phlegm, sometimes of a salt or bitter taste; or expectoration of mucus streaked with blood; wheezing, or rattling of mucus in the chest; the paroxysms of coughing are frequently accompanied with soreness in the belly, as if from a bruise or blow, or painful shocks in the arms, shoulders, or back, and sometimes followed by a sensation as if the stomach became inverted from the violence of the cough; involuntary emission of urine when coughing; loose cough, with aching in the chest, hoarseness, cold in the head; excited by a sensation of scraping or of erosion in the throat; shivering.

*Dose*: Six pills in a teaspoonful of water, every four hours.

**CHAMOMILLA** is indicated by dry cough, excited by continual tickling or irritation in the upper part of the windpipe and chest, and increased by talking; the cough is most troublesome *during the night*, but also occurs during the day, particularly in the morning and towards evening; accumulation of tenacious phlegm in the throat; wheezing in the chest, cough during sleep, sometimes accompanied with paroxysms, as of threatening suffocation; cough with scanty expectoration of tenacious, bitter phlegm. This medicine is well adapted to the treatment of coughs in children, accompanied with more or less of the symptoms above described or with hoarseness, cold in the head, dryness in the throat and thirst; great fretfulness; fever towards evening; paroxysms of coughing after crying, or after a fit of passion.

*Dose*: Of a solution of eight pills to three tablepoonsful of water, give a teaspoonful every four hours.

**BRYONIA** is indicated by catarrhal cough occurring in winter during the prevalence of frost and cold easterly winds, with aggravation of the fits of coughing on coming from the the open air into a warm room. The following are the general indications for its employment: *dry cough*, with or without hoarseness, and *excited* by constant *irritation in the throat*, or as if caused by vapor in the windpipe, with greatly accelerated respiration, as if it were impossible to obtain sufficient air; spasmodic, suffocating cough, *after partaking of food or drinks*, and also after midnight; cough with *prickings* or *shootings in the chest* and violent bursting head-

ache, especially at the temples—also with prickings in the pit of the stomach, or in the side; further, in loose cough, day and night, with scanty expectoration of *whitish* or *yellowish* viscid phlegm, or slight spitting of blood, the paroxysms being sometimes followed by vomitings and accompanied by pain as from a bruise under the collar-bones, and pain and fullness in the forehead, as if the contents of the head were forced out, this remedy will frequently be found of great service;—and likewise in dry, nervous cough.

*Dose:* Of a solution of twelve pills to three table-spoonful of water, give a tea-spoonful every three hours.

RHUS-TOXICODENDRON is indicated by *short, dry* cough, worse towards *evening* and *before midnight*, excited by *tickling in the chest*, attended by hoarseness, or a feeling of roughness or rawness in the throat, congestion in the chest, a sensation of suffocating constriction, anxiety, and shortness of breath; cough on waking in the morning, or short cough, with *bitter taste* in the *mouth*, on lying down at night and on waking in the morning, with expectoration of viscid phlegm, sometimes followed by vomiting, pains in the stomach, and dartings or pricking in the thigh. Cough with expectoration of bright blood, with sensation of sinking or exhaustion of the chest, or shooting pains in the chest and sides.

*Dose:* Eight pills in a tea-spoonful of water night and morning.

IPECACUANHA is more particularly required when the following symptoms occur; catarrhal, nervous, or spasmodic cough, particularly at night, attended with painful shocks in the head and stomach, and followed by *nausea, retching, and vomiting*; or *dry cough*, arising from tickling in the throat; or *severe, shaking, spasmodic cough*, with oppressed breathing, almost amounting to suffocation. In the case of children, this remedy is frequently valuable, when they appear to be threatened with *suffocation from the accumulation of phlegm*, or where the paroxysm is so severe as scarcely to afford time for respiration, causing the face to assume a livid hue, and the frame to become quite rigid.

*Dose:* Of a solution of twelve pills to three table-spoonful of water, give a tea-spoonful every hour, until positive change.

MERCURIUS is indicated by *catarrhal cough with hoarseness or watery discharge from the nose, or accompanied with diarrhœa*; or dry cough, excited by irritation in the throat, or the upper part of the *chest*, which becomes particularly troublesome towards evening, and at night; sometimes with slight prickings in the chest when coughing or sneezing; excited or increased by *talking*; cough in children with discharge of blood from the nose, vomiting, and headache; dry, spasmodic cough, with pain in the head and chest as if they would burst, retching after the paroxysms, and occasional expectoration of blood.

*Dose:* Four pills in a tea-spoonful of water, night and morning, until distinct change; or, if retching be present, the like dose, every two hours, *after fits of coughing*.

CARBO-VEGETABILIS is particularly indicated by *hollow* cough, excited by irritation, or a troublesome sensation of crawling in the throat, and attended with *burning pain* and sensation, as if from excoriation in the

chest; catarrhal or nervous *spasmodic cough*, frequently followed by inclination to vomit or vomiting, occurring in paroxysms throughout the day; cough with *hoarseness*, especially towards evening, or morning and evening, increased by speaking. Obstinate cough with expectoration of greenish phlegm, or even of yellowish matter, or with expectoration of blood and burning sensation in the chest (a characteristic indication for this remedy as well as for *Arsenicum*).

*Dose*: Four pills in a teaspoonful of water, night and morning, for four days.

ARSENICUM is required for cough with oppression at the chest, and tenacious phlegm in the upper part of the windpipe and chest; cough excited by a sensation of *dryness* and *burning* in the windpipe. *Dry cough, chiefly in the evening after lying down*, often with *difficult respiration and fear of suffocation* (*suffocative catarrh, catarrhal asthma*), as if arising from inhaling the *vapor of sulphur*; dry cough, excited by eating or drinking, or by *ascending stairs*, or cough which arises *as soon as the open air is encountered*; *thin, acrid discharge from the nose*; *sneezing*; *periodic dry cough*, —nocturnal cough with general burning heat, cough with expectoration of bloody phlegm; catarrh in the lungs of old people, attended with tenacious mucus expectoration, which is extremely difficult to eject and causes rattling in the chest, oppressed respiration, and, frequently, symptoms of impending suffocation, or paralysis of the lungs.

*Dose*. Three pills in a teaspoonful of water, every two hours.

AMMONIUM-CARBONICUM is indicated by *dry, tickling, suffocative cough*, especially in the morning, sometimes with fever, occurring during the prevalence of a cold, stormy, bleak state of the atmosphere, and attended with a sensation of *heat or burning behind the breast-bone*, resembling that which is occasioned by drinking spirits; hoarseness; cold in the head, with copious discharge of acrid, watery fluid.

*Dose*: As for *Arsenicum*.

CAUSTICUM, which may sometimes be of service in cases analogous to that which has been named as suggesting *Ammonium c.*, either before, after, or in the place of that medicine, is especially indicated by *dry, hollow cough*, which even wakes the patient from sleep; short cough, excited by tickling, crawling, or a feeling as if the throat were excoriated, or by talking; and cold, attended at times with burning, or a sensation of *soreness in the chest*, and rattling of phlegm; pain in the hip, and, occasionally, involuntary emission of urine when coughing; pain in the chest, as if it were raw and sore (the patient comparing his feelings to those which he could conceive to arise from the application of a blister to the exterior of his chest).

*Dose*: Three pills as directed for *Arsenicum*.

SILICEA is indicated by cough with oppressed breathing on lying on the back, or cough attended with tightness and oppression at the chest, as if something stopped the respiration while speaking or coughing. *Fatiguing, or deep hollow cough*, day and night, aggravated by *movement* or by speaking, and sometimes attended with aching and pain, as if from a bruise, in the chest; *cough with copious expectoration of transparent hlegm* or purulent matter, sometimes streaked with blood; cough which



asthmatic breathing and emaciation, and with dread of suffocation at night; cough irritated or excited by a sensation as if a hair were on the tongue.

*Dose:* Six pills in a teaspoonful of water, night and morning, for four days.

SULPHUR is of paramount importance in some cases of obstinate coughs, and particularly in *dry* cough which disturbs the patient at night as well as during the day; the cough is frequently excited after partaking of food, or during a deep inspiration, and is generally attended with a sensation of spasmodic constriction in the chest, sometimes followed by inclination to vomit, or the involuntary escape of urine, or pain as if from excoriation, or pricking pains in the chest; headache, pains in the chest, belly, loins, and hips; also cough, with expectoration of thick, *whitish* or yellowish phlegm, or of a greenish-yellow, fetid mucus, or purulent matter, of a saltish or sweetish taste; feverish cough with spitting of blood.

*Dose:* Three pills in a teaspoonful of water, morning and evening, for four days.

CALCAREA-CARBONICA is particularly indicated when the following symptoms occur: dry cough, aggravated towards evening, or at *night*, excited by *tickling* in the throat, or by a sensation as if there were *feather-down in the throat*; also loose cough, with rattling of mucus in the chest, and expectoration of offensive, *thick, yellow phlegm*; anxiety.

*Dose:* Six pills in every respect as directed for Sulphur.

SANGUINARIA-CANADENSIS.—Dry cough; pain and stitch in the right side of the chest; diseases of the lungs; it has a certain reputation in the cure of coughs.

*Dose:* The same as Calc. carb.

SEPIA.—The symptoms which indicate this medicine are as follows: cough, with copious expectoration of phlegm of a *saltish taste*, and of a yellow or greenish color; also dry, *spasmodic* cough, particularly at night, or on first lying down, attended, in children, with crying, fits of choking, nausea, retching, and bilious vomiting. This remedy is especially adapted to individuals having a constitutional taint, such as the scrofulous, scorbutic, etc., and, in chronic coughs, with thick, yellowish, greenish, or even *puriform* expectoration, with a putrid taste, it is also a valuable remedy.

*Dose:* Four pills in a tablespoonful of water, night and morning, until change.

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### CROUP.

In an attack of Croup it is of the utmost importance to afford help before the dangerous stage sets in. The mother who has the best opportunity of watching her child may avert the danger by the care and treatment recommended here.

If the family physician is in reach he should be sent for at once. If no physician is near, this treatment may be used in perfect confidence of

its ultimate favorable effects. Persons who have once heard the croup cough will never forget it; those who have not heard it may know it by the following signs: It is very much like the hoarse barking of the common cur dog; sometimes shrill (crowing), sometimes deep and hollow, but rough; it is an anxious sound. The cough occurs in paroxysms.

The inspirations are long and labored; the expirations interrupted and jerking. The little patients frequently toss about the bed in great agony, stretch the neck, and bend the head backwards, boring it into the pillow, which last should not be prevented, as, if forced to raise the head too high suffocation may take place in consequence. The pulse is feverish and the urine deep red. True membranous croup is not near so frequent as most persons imagine; most cases of croup would remain without any danger if the proper treatment was at once pursued.

#### ALLOPATHIC TREATMENT.

Laryngitis with spasms of the larynx, (Spasmodic, Catarrhal or False Croup) is the form of Croup which is most common with children who are said to be "subject to croup." As the attack generally occurs suddenly, and is quite alarming in its symptoms, it is very important that the parent should know what is to be done. If the little patient is put into a warm bath at the temperature of 100° the great probability is that the spasm of the larynx, and the difficulty of breathing will soon cease. The bath should continue from ten to twenty minutes, or until the full relaxing effect is produced. The patient, if four or five years old should then have a dose of twenty drops to three fourths of a teaspoonful of Paregoric with half a teaspoonful of Syrup of Ipecacuauha, and placed in a warm bed. The throat should be then well rubbed with Turpentine, or a Liniment composed of Aqua Ammonia one part, Olive Oil two parts, mix and add one part of Turpentine. The severe smarting (counter irritation), of the application will prove most servicable.

If the spasm is not relieved by the warm bath an emetic should be given. The Syrup of Ipecacuauha is very suitable in doses of a teaspoonful from ten to twenty minutes apart until vomiting occurs, or the paroxysm ceases. In very robust children the Hive Syrup is admissible for this purpose in doses of fifteen to thirty drops every fifteen minutes, but on account of the extreme and continual depressing effect of the Tartar Emetic it contains should be given only to the strongest children. Twenty grains of Powder of Ipecacuanha may be put in two or three table-spoonsful of warm water and a teaspoonful given at a dose. Bloodroot given with Ipecacuanha has proved serviceable with both catarrhal and true croup, in the hands of Dr. Ransom of Burlington, Iowa. The following is a suitable formula: Take of Powdered Ipecacuanha a dram, Powdered Bloodroot a scruple; mix, and divide into three powders. Put one powder in a wineglass of warm water and give one or two teaspoonsful, or one dram each of the Fluid Extract of Ipecacuanha and Tincture of Bloodroot, may be given in doses of five or six drops every ten or twenty minutes in Syrup or sweetened water. The dose of the emetic should be repeated until vomiting occurs or the paroxysm ceases. If neither result can be produced by these means, a teaspoonful of Powdered Alum may be given, mixed with syrup or honey, to produce vomiting, which

will relieve the difficult breathing. The use of Ether by the mouth and inhalations would be prudent at the hands of a physician, and is useful; the same may be said of Chloroform.

As soon as the sickness of the stomach has subsided, unless the bowels are well open, a saline cathartic should be given, as, a teaspoonful or two of Rochelle Salts in Lemonade or from five to ten grains of Calomel. If the emetic has been given at night the cathartic can generally be given the next morning.

A poultice, a flannel wet with a saturated solution of Gum Camphor in Olive Oil or Belladonna Ointment, may be applied to the neck after thorough rubbing with the Turpentine Irritating Liniment.

During the day the patient should have an anodyne sufficiently often to relieve the cough, as two parts of Paregoric and one part Tincture of Hyoscyamus may be given in doses of twenty to forty drops to children old enough to run out of doors.

The Tincture of Belladonna may be given instead of Hyoscyamus in doses of two to ten drops. The anodyne and a hot foot bath should be given at night.

The following is a suitable mixture for an anodyne to be administered through the day: Take of Paregoric half an ounce, Syrup of Ipecacuanha half an ounce, Tincture of Hyoscyamus two drams, water and simple syrup each three drams; to this may be added a dram of Citrate of Potash previously dissolved in the water. Half a teaspoonful may be given from two to four hours apart to a child two or three years old, a teaspoonful to older children.

If the fever and pulse should run high, a quarter or a half of a drop of Tincture of Aconite may be given without reference to other remedies every half hour until an impression is made on the fever; then at intervals of two or three hours, as, take of Tincture of Aconite a dram, Syrup three drams; mix.

*Dose:* One or two drops.

If the child is weakly a grain of Quinine (in pill or powder) should be given three or four times a day and a teaspoonful of a solution of half a dram of Pyrophosphate of Iron in four ounces of simple syrup.

The child should be confined to the bed during the acute stage, and after this passes, should be kept in the room for a few days and then gradually accustomed to the open air by going out for a short time only in the middle of the day.

As a preventive of this annoying trouble, children of all ages should be clothed in flannel during the later autumn, winter and spring. The dress should be high in the neck, the sleeves long and warm. The legs and feet should also be warmly dressed with woolen stockings and drawers. Then, if warmly clad and the feet kept dry and warm, out of door life will be beneficial. In weakly children tonics of Quinine and Iron will prove serviceable. The sugar-coated pill and Pyrophosphate of Iron recommended above will be found appropriate given three times a day.

It is needless to say that a recurrence of the paroxysms of difficult breathing occurring at any time in the course of the disease, demands the repetition of the hot bath or emetics, or both.

True Croup—inflammation of the larynx with exudation (false membrane),—the most dangerous of all the forms of Laryngitis—is not as a rule, marked in the beginning of the disease with such alarming symptoms as accompanies the various forms of false croup, yet upon its early recognition, and prompt measures of treatment, depends the degree of success which will follow our efforts.

In order, if possible, to render the distinction between false and true croup, the following table is inserted, which is compiled from various authorities.

Simple laryngitis with spasm or false croup.

Begins with nasal catarrh, or cold and hoarse cough, or with a sudden attack at night with suffocation. The throat is natural or slightly reddened.

After the paroxysm the child seems well or nearly so, the fever disappears or diminishes greatly. Voice is nearly natural, never whispering.

If a paroxysm returns, it is during the following night, but not as severe; the hoarseness disappears and the cough becomes loose.

Seldom lasts more than three days.

Seldom destroys life.

Laryngitis with Exudation or true croup.

When epidemic, begins as an inflammation with exudation of false membrane. When not occurring epidemic the invasion is more gradual, with a slight hoarseness one or two days. There is fever, hoarseness increases, the cough is hoarse, muffled, cramped.

Generally there is exudation in the throat, and later paroxysms of suffocation.

Fever continues; breathing is difficult, labored and each act greatly prolonged; cough hoarse and smothered; voice hoarse and whispering.

The difficulty of breathing and suffocation increases; the cough and voice are smothered or gone altogether; the stridulous (harsh sound) of breathing continues.

Seldom lasts less than five or six days. The hoarseness lasts several weeks.

Proves fatal in the majority of cases.

So that if a case recovers, and no false membrane has been discovered in the expectorated matter the case was almost positively not one of true croup.

The child should be confined in bed. The food should be digestible and nutritious, such as milk, strong beef tea (made by putting a pound of finely minced, lean beef into a pint of cold water, and slowly raising the temperature to 160° F., and maintaining it there for four hours—a little water may be supplied from time to time, to supply loss by evaporation) or essence, raw eggs beaten with sugar and water or milk. Starchy food may be allowed in limited amount.

In this disease the writer believes that local applications hold the first rank, and the best of all local means is the constant inhalation of steam. This end is accomplished the best by maintaining the room at a temperature



of 85° or 90°, and fill the air with steam from kettles of boiling water. The breathing of this warm, moist air has the best effect upon the local inflammation, relieves the spasm of the larynx, and facilitates the ease of breathing and also contributes to the separation of the false membrane by allaying inflammation and hastening separation. A kettle may be made of tin with a spout so fixed that sitting on a stand at the side of the bed a jet of steam can be thrown across the patient's face. By this means the moisture inhaled can be greatly increased. This kettle can be heated by a spirit lamp. A simply constructed kettle for this purpose was invented and sold in New York at \$3.00. It is called Rouchette's croup kettle, but any tinner can make one which will answer the same purpose. The inhalation of steam should be continued through the whole course of the disease. The freedom from spasm and other difficulty of breathing while this warm, moist air is inhaled, greatly decreases the need of emetics which will be spoken of hereafter.

Counter irritation to the neck over the larynx should be thoroughly made with Turpentine, or the Liniment of Amonia and Turpentine directed for false croup, or Tincture of Iodine applied twice a day, after which Belladonna Ointment containing a scruple or half a dram of Camphor to the ounce, should be freely applied to the neck, and then cover with a flaxseed poultice. The Camphor can be more easily incorporated in the Ointment by dissolving it with a little Ether. In the case of some very strong children, cold applied to the neck over the larynx and windpipe is more effective in the earliest part of the disease. A piece of pork should be applied to the sides of the neck to keep it from getting cold, and a napkin rung out of ice water or containing a lump of ice, should be laid over the neck, and then covered with a dry towel to prevent wetting the patient's clothes and bed.

The best known solvent for the false membrane is Lime Water. It is best applied from time to time by means of an atomizer or spray apparatus, and should be used warm. The air of the room may be purified every hour or two, slacking a lump of quick lime in the room.

The other most useful applications which may be applied to the inflamed surface, are: Lactic Acid, Nitrate of Silver, Tincture Muriate of Iron, Tannin and Alum. Three and a half drams of Lactic Acid to ten drams of Distilled Water, may be used with spray apparatus.

Bromine may be used as directed in Diphtheria. Half a dram of Carbolic Acid to four ounces of water may be applied with an atomizer. It is, doubtless, especially useful after suppuration, and separation of the false membrane has begun.

Nitrate of Silver, if used, should be applied to the patches of false membrane only, but in strong solution by a physician.

Tannin, in Glycerine (one or two drams to the ounce), may be applied, with a large camel's hair brush, to the orifice of the larynx, with the aid of a laryngial mirror.

Tincture of Iron, one or two drams to the ounce of Distilled Water, and Alum; in saturated solution, may be applied by a spray apparatus. Of these, the writer considers them all inferior to Lime Water.

In the treatment of croup, emetics hold an important place. They aid in expelling the false membrane when it becomes detached. They

should be given at once, when the labored, smothered breathing indicate the presence of false membrane in the larynx. Many physicians prescribe an emetic in the beginning of the disease, believing its tendency is to prevent the development of false membrane, and hasten its separation. If the patient is strong, an emetic of *Ipecacuanha* may be given at once. Mix a teaspoonful of *Ipecac* in a half a glass of water, and give from a dessertspoonful to a tablespoonful every fifteen minutes, until vomiting takes place. Bloodroot, to one-third the amount of the *Ipecacuanha*, may be given in the same mixture. The efficiency of the *Ipecac* emetic is increased by giving, at the same time, a teaspoonful of powdered *Alum*.

In cases of feeble children, the Sub-Sulphate (Yellow Sulphate) of Mercury is the best emetic, and after the disease has progressed for a time, as it causes the least exhaustion of any of the emetics. Three to five grains, rubbed up with sugar, may be placed on the base of the tongue and swallowed with a little water. If vomiting does not occur, the dose should be repeated at the end of fifteen minutes. Professor Barker, of New York, prescribes this remedy immediately when called to a case of croup, and claims not to have lost a case since he began this treatment.

*Alum*, powdered, given in doses of a teaspoonful in syrup or honey, with or without a teaspoonful of Syrup of *Ipecacuanha*, repeated every fifteen minutes until vomiting occurs, is a serviceable emetic.

One or two grains of Sulphate of Copper, given in powder, with two or three grains of *Ipecacuanha*, given every ten minutes, until vomiting occurs, is, after the Yellow Sulphate of Mercury, probably the best emetic in true croup. After vomiting has been produced by Sulphate of Copper, many German physicians claim it has a specific effect upon croup, which may be obtained by giving it in doses of a quarter of a grain every two hours.

While it is true that in the majority of cases which have recovered, emetics have formed a prominent part of the treatment, the writer believes they have been beneficial only by removing, during the act of vomiting, the false membrane that was already detached or separable, and not by any specific effect. Hence, in his opinion, the indication for their use is the difficult breathing. They should be given from time to time, to accomplish this purpose, three or four times in the twenty-four hours. In extreme cases, every three or four hours.

In order to sustain the strength of the patient, some nourishing and quickly-digestible food should be given immediately after the action of an emetic.

Mercury is thought, by many physicians, to diminish the inflammation and exudation of false membrane. This opinion is held by Prof. H. C. Wood, in his work on therapeutics, second edition, when the patient is robust and the general symptoms active, and no time should be lost in bringing the patient under its influence. From half a grain to a grain, may be given every two or three hours, or three grains with three grains of Dover's Powder may be given two or three times a day, until the patient is mercurialized (salivated). The writer is skeptical as to the benefit from this practice, but in so dangerous a disease, if the good which may come from it is ever so small, the voice of any one ought not to be

raised against it. It is not used in the writer's practice. Alkalies are more serviceable.

In the use of alkalies the following formula may be used : Take of Chlorate of Potash two drams, Citrate of Potash two drams, Tincture Muriate of Iron a dram, Simple Syrup two ounces, water sufficient to make four ounces. Mix.

*Dose:* One or two teaspoonsful every four hours.

A dram and a half of the Muriate of Ammonia may be used instead of the Citrate of Potash, or two or three grains may be given separately in water. This treatment should be continued night and day until the cough becomes loose or treatment is abandoned on account of the helplessness of the case.

Anodynes are generally required in this disease. The most useful is Opium, but on account of the tendency of the disease to destroy life by suffocation, much caution should be used in its employment. It is best to give it alone, or add it to other medicines as they are given, that it may be discontinued at any time, which should be done on the appearance of asphyxia (symptoms of suffocation).

The Deodorized Laudanum in doses of four or five drops, or three grains of Dover's Powder, sufficient to maintain such an impression as will relieve excitement and spasm. Purgative may be used for this purpose. In some cases the Bromide of Potassium with a little Hydrate of Chloral acts better. Take of Bromide of Potassium two drams, Hydrate of Chloral half a dram, Syrup of Tolu half an ounce, Water an ounce and a half.

*Dose:* A teaspoonful three or four hours apart until spasmodic symptoms cease.

If spasmodic action is marked, it can be given every half hour until relieved. To those who have never resorted to it the little call for anodynes when the patient is kept in a warm room, filled with vapor, will be surprising.

When all remedies are proving unavailing and the difficult breathing increases and marches on to suffocation, the operation of tracheotomy (opening into the windpipe) should be resorted to by the medical attendant as offering the only hope for recovery. The friends ought not to object. After this operation the treatment is simply to keep the patient in the warm moist atmosphere. Keep the tracheotomy tube clean and support the powers of life by nourishing food. The other danger is from the disease traveling down the windpipe and causing death from suffocation or from the development of bronchitis or pneumonia. The steady continuance of the moist air at 90° of temperature is the best preventive. Should they occur (broncho-pneumonia) the chest should be wrapped in an oiled silk jacket and the skin of the chest frequently rubbed with turpentine or the ammonia and turpentine liniment before recommended for the throat. Should the patient recover, the tracheotomy tube may have to be worn for months or until the larynx is clear of obstruction.

At any time during the disease, if the patient becomes enfeebled, stimulants may have to be given in addition to nourishment, as, a tea or

dessertspoonful of brandy in milk, beef tea or egg. Wine whey may be given if preferred.

In the paragraph on emetics Tartar Emetic (and Hive Syrup), were not mentioned because deemed unnecessary, as having no special benefit on the disease and frequently doing harm, and sometimes even causing death by its prostrating effect, when given at a time when danger was apparently not immediate.

### HOMŒOPATHIC TREATMENT.

ACONITE is the remedy in the first stage when there is high fever, dry hot skin, and *great restlessness*. On attempting to swallow, the child cries as if from soreness and pain in the throat. Loud breathing during expiration but not during inspiration.

HEPAR SUL.—Croup with *loose, rattling, choking cough*; the air passages appear clogged with mucus. The child cannot bear to be uncovered and coughs whenever any part of the body is uncovered enough to get cold. Great drowsiness and profuse sweat.

IODINE.—Soreness and pain in the throat and chest, which the child manifests by grasping the parts with its hand. *Dry, short, hacking cough* with difficulty of breathing. *Membranous croup with wheezing, sawing respiration*. Face pale and cold, voice deep, rough, and hoarse.

KALI BICHROMICUM in *true membranous croup*. The disease approaches gradually; at first there is slight dyspnoea (short breathing) with hoarse, croupy cough; as it progresses the difficulty of breathing increases and the air, as it passes in, *sounds as if it were passing through a metallic tube*. Hoarse, dry, barking cough; tonsils and throat red, swollen, and covered with a membrane; head inclined backwards; violent wheezing and rattling in the windpipe, heard at a distance. *This is one of the very best remedies known, in true croup; use crude, finely powdered.*

SPONGIA in non-membranous croup, where there is a rough, crowing sound to the cough. *Slow, loud, wheezing and sawing respiration*, or suffocative fits with inability to breathe, except with the head thrown backwards. Discharge from the nose or *sneezing*, or dribbling of saliva from the mouth.

*Dose:* Any of these remedies need to be repeated rapidly during the most critical part of the attack, say a dose every thirty minutes to two hours.

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## CHAPTER XXI.

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### DISEASES OF THE LUNGS.

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#### CONGESTION OF THE LUNGS.

SYMPTOMS. The symptoms of congestion of the lungs vary greatly, according to the condition of the lungs and the degree of congestion. The lower grades of acute congestion only cause a sensation of oppression



with shorter and more hurried breathing, at times passing away rapidly, at other times more slowly, or having remissions, but being otherwise painless. In the higher grades the breathing suddenly becomes oppressed to an extraordinary degree, so that the patient seems on the point of suffocation. The respiration is hurried, superficial, noisy; the pulse increases in frequency and fullness, the face looks flushed. Most commonly these symptoms are associated with a desire to cough, and the frothy sputa are tinged with blood. There is no pain if the lungs are otherwise sound, whereas consumptive persons experience a great deal of pain. In the highest grades of congestion the dyspnoea (difficult breathing) increases so rapidly and the congestion becomes so great that the patients die of asphyxia, sometimes so suddenly that an accident of this kind has been termed apoplexy of the lungs.

The lesser grades of the affection generally terminate sooner or later in complete recovery.

Passive congestion has almost the same symptoms as the active form, great oppression of breathing, red face, accelerated action of the heart.

The prognosis in acute congestion is almost always favorable; congestions caused by violent emotions are the least promising. A frequent repetition of the attacks is always a very bad sign; they show that either the heart is intensely diseased, or else that consumption is their exciting cause.

#### ALLOPATHIC VIEWS.

The treatment of Acute Congestion of the lungs does not differ in the first place, if it be general, from that given further on in this chapter for the invasion of Acute Bronchitis; or if the Congestion be limited to one (or more) lobes of the lung, the treatment will be the same as that of Pneumonia during the stage of invasion. Should the disease not end at once the subsequent treatment will be that for Bronchitis or Pneumonia, whichever the affection proves to be. If the congestion produces hemorrhage, the treatment given for hemorrhage from the lungs should be used.

Cold may be applied for the relief of acute congestion in the same way as is hereafter directed in hemorrhage from the lungs.

A passive congestion of the lungs may arise from any cause which obstructs the return of blood through the pulmonary veins to the heart. In Asthma or Emphysema of the lung (dilation of the air cells of the lung) imperfect oxygenation of the lung causes passive congestion in the pulmonary circulation. A diseased condition of the mitral orifice of the heart, which obstructs the flow of blood or allows the blood to regurgitate from the left auricle into the right ventricle, is another cause. Tumors pressing on the pulmonary veins may be another cause. In other instances the whole venous system will become congested and the skin livid. Dropsy will occur in the case of heart disease or an obstructive tumor. The treatment will have reference to the relief of the disease causing the obstruction.

It should be born in mind that the congestion is in an entirely different part of the circulation in acute congestion of the lungs which is in the nutrient circulation from the bronchial arteries and in passive con-

gestion which is from obstruction to the return flow of blood which passes through the lungs for the purpose of being purified.

### HOMŒOPATHIC TREATMENT.

The main remedy for all active congestions of the lungs is undoubtedly ACONITE. Aconite is particularly appropriate in congestion depending upon heart affections, or indicating and accompanying consumption; such individuals have a delicate skin, bright complexion and sanguine temperaments. If the disease was caused by a fit of anger, or vehement chagrin, or mortification, Aconite is indicated so much more fully.

*Dose:* Six pills in a teaspoonful of water, every hour to three hours.

BELLADONNA has likewise many symptoms pointing to pulmonary congestion, but it is not so easy to determine the conditions for which Belladonna is indicated; they likewise occur less frequently. Belladonna is preferable, if not only the lungs, but likewise the brain is involved in the congestion, and it is less depending upon disease of the heart than upon some other affection. Leading symptoms distinguished from those of Aconite are: dark redness of the face, bluish redness of the lips, glistening eye; anguish and restlessness; a constant, dry, hacking cough, or else a spasmodic and dry cough.

*Dose:* As for Ac.

NUX-VOMICA is an excellent remedy for certain kinds of pulmonary congestion, if the following conditions prevail: The attack is occasioned by sedentary habits, excessive mental efforts, the use of coffee, ardent spirits, in the case of sanguine, robust individuals who are free from disease of the heart; after a copious meal, in the night. The symptoms resemble those of Belladonna more than they do those of Aconite.

*Dose:* As for Ac.

DIGITALIS PURPUREA is, inappropriate in an isolated attack, but is, on the other hand, indicated if the congestions occur very frequently or evidently point to tuberculosis. In such affections, however, there is every reason why the medicine should be given very cautiously. It is not absolutely necessary for the heart to be the starting-point of the disease, for uncomplicated, tubercular congestions of the lungs are likewise most easily relieved by Digitalis.

*Dose:* As for Ac.

BRYONIA is the next best remedy to this latter drug. In very acute cases which may become dangerous to life by the premature supervention of an acute œdema of the lungs, no time should be lost unnecessarily by awaiting the effect of the first named three remedies; if they act at all, they will show their curative influence after the very first dose. If they do not afford speedy relief, Phosphorus should at once be used; or, in case of heart affections, Arsenicum.

*Dose:* Six pills every two hours.

## SPITTING OF BLOOD.

## DISCHARGE OF BLOOD FROM THE LUNGS.

## RUPTURE OF A BLOOD-VESSEL.

**SYMPTOMS.**—Expectoration of blood, in greater or less quantity, induced by coughing, attended by symptoms more or less severe.

**VARIOUS FORMS.**—This disease discovers itself in three varieties: first, by an effusion of blood from the mucous lining of the air-tubes; secondly, by congestion of the lungs; and, thirdly, by the rupture of a blood-vessel in the tubular cavity of the lungs, during the course of Consumption. It is, however, proposed to deal generally with the subject, and to point out the different remedies found useful in the treatment, according to the symptoms present.

**DISTINCTIVE CHARACTERISTICS.**—We must be careful not to confound this disease with affections of the mouth or gums, or the occurrence of discharge of blood from the nose escaping through the posterior opening of the nostrils, and being returned by the mouth. When the blood proceeds from the chest, it is almost invariably attended with a sensation as if it came from a deep-seated source, is warm, generally tastes sweet, and there is, frequently, a simultaneous burning and painful sensation in the chest.

**PRECAUTIONS TO BE OBSERVED.**—When the attack is imminent and is preceded by well-known premonitory symptoms, the patient should refrain from loud or prolonged speaking, calling, singing, blowing wind instruments, violent exercise of the arm, running, ascending stairs, or, in short, from anything calculated to increase the respiratory action, or otherwise to fatigue the chest.

**ISSUE AND RESULTS.**—When spitting of blood occurs in a robust and healthy person of sound constitution, it is not very dangerous; but when it attacks slender and delicate persons, it is more serious and difficult of removal. It is, however, chiefly when the patient has had a succession of severe attacks, and the blood is discharged in a large quantity, that the case may be considered dangerous.

**SYMPTOMS.**—The disease may present itself without any marked pains or difficulty of breathing, and pass off with no return of the attack; or be preceded by dry cough, oppression, or tightness at the chest, shivering coldness of the extremities, great lassitude, and high pulse—and be accompanied by hacking or husky and distressing cough, anxiety, quick pulse, pale and livid countenance—cease, and then return in a few hours, and be followed by difficulty of respiration and cough: in still more severe cases, when a marked tendency to Consumption exists, the anxiety, oppression at the chest, and febrile symptoms are more severe, pure blood, if coughed up, and the paroxysms frequently return.

## RUPTURE OF A BLOOD-VESSEL.

[The rupture of a blood-vessel is a rare occurrence, although it sometimes occurs in consumption. When, however, a blood-vessel of any consequence, included in a tuberculous excavation, does give way, the result is generally fatal.]

**CAUSES.**—Indulgence in spirituous beverages, overheating the body

by immoderate exertion, or too great external heat; blowing wind-instruments; contusion of the chest or back; falls; injury of the lungs; breathing a vitiated atmosphere, or vapors charged with acrid substances; colds or coughs; violent mental emotions; diseased state of the lungs, whether as the immediate result of inflammation or during the progress of actual consumption; a general scrofulous habit; suppressed menstrual, hæmorrhoidal, or other discharges; or repelled cutaneous eruptions.

#### ALLOPATHIC TREATMENT.

In hemorrhage from the lungs quiet in bed is to be insisted on, the head and shoulders should be raised, the food cool, drinks should be cold, and small pieces of ice may be frequently taken into the mouth, the voice is not to be used. Food should be simple and nutritious. Liquids are preferable to solids, as milk, raw eggs beaten up with sugar and water, and beef tea.

Regarding treatment by medicines the remedies which are constantly on hand, and are appropriate are Turpentine, Alum, Sugar of Lead and Ice. Ten to twenty drops of Turpentine may be given every hour. One or two teaspoonsful of Glycerine flavored with three or four drops of Oil of Gaultheria will almost completely cover the taste of Turpentine—it may be given on sugar. Sugar of Lead may be given in doses of two to five grains two to four hours apart. Two grains of Alum may be given with an equal quantity of sugar every two hours. In case there is pain small doses of Opium should be given at the same intervals as long as required; as half a grain of Opium, five grains of Dovers Powders, or ten drops of Laudanum. In applying cold to the chest, large linen clothes may be wrung out of ice water, and wrapped around the chest, or what is better, cold may be applied to the chest and back by means of ice-bags. It is unnecessary to resort to this, unless the bleeding is severe, especially, if the patient is in good strength. Tight bandaging of a limb at its junction with the body, will be serviceable by preventing the return circulation.

Other remedies which are most important are Ergot, Ipecacuanha, Digitalis, Gallic Acid, Subsulphate of Iron.

Ergot may be given in connection with other remedies in doses of one or two teaspoonsful of the powder or Fluid Extract as often as every half hour if required. The following is a good mixture: Take of Fluid Extract of Ergot three ounces, Fluid Extract of Ipecacuanha, and Deoderized Tincture of Opium each half an ounce, mix, and give a teaspoonful every half hour or hour, or take of Fluid Extract of Ergot an ounce, Fluid Extract of Ipecacuanha, Fluid Extract of Digitalis each half an ounce, mix and give from thirty drops to a teaspoonful as is required.

It will be observed in the use of Ipecacuanha, in frequently repeated doses, for hemorrhage, that when vomiting occurs the bleeding ceases. Digitalis is especially serviceable when a little bleeding occurs constantly with the expectoration, with an occasional mouthful of blood. Gallic Acid, in doses of ten grains with ten drops of Aromatic Sulphuric Acid in a wineglass of water, is a valuable internal astringent in cases of hemorrhage. This dose may be repeated every two hours. The Solution of



Sub-Sulphate of Iron, in doses of twenty drops in Glycerine, have proved effectual.

Astringent inhalations are a very useful form of medication, given from an atomizer or spray apparatus. The following solutions may be used for atomizing: Tannin twenty grains to the ounce of Distilled Water; Alum in saturated solution; and the solution of the Sub-Sulphate of Iron from ten drops to half a dram, in an ounce of Distilled Water.

Persons who have hemorrhage from the lungs may be saved a great deal of unnecessary alarm by a knowledge of the fact that the trouble, of itself, very seldom leads to serious results. Aside from the fact that it is a symptom of tuberculous or some serious disease, no uneasiness need be felt.

### HOMEOPATHIC TREATMENT.

In by far the greater number of cases the discharge or spitting of blood soon ceases of its own accord; the most important object, therefore, is to seek to *cure* the complaint when the hemorrhage has ceased, and thereby to prevent its return, or to check the development of organic disease of the lungs (that is, disease attended with alteration of structure.)

PULSATILLA, COCCULUS, SEPIA, SULPHUR.—One or more of the last three of these remedies will sometimes be required, successively, after the previous employment of Pulsatilla, when this remedy is insufficient to restore the regularity of the periodical discharges, and the spitting of blood is associated with *suppression of the menses*.

PULSATILLA is, however, the medicine which is most appropriate wherewithal to commence treatment, in the majority of cases arising from suppression of the monthly discharge in females or of a hæmorrhoidal flux in either sex (particularly when the individual is of leuco-phlegmatic temperament), and also in other instances characterized by the following symptoms: expectoration of dark, clotted blood, attended with shivering, especially towards evening, or at night, and great anxiety; pain in the lower part of the chest; feeling of flaccidity in the region of the stomach, and weakness.

*Dose:* Six pills in a teaspoonful of water night, morning and noon, for a week; then pause four days, after which the course may be resumed as before, if necessary, and so on, until change.

Refer also to the articles on "Green Sickness" and "Suppression of the Menses."

BRYONIA is a good remedy in doses where the expectoration of blood, which is often in a coagulated state, is excited by a tickling cough; and where there is oppression at the chest, with frequent necessity to take a deep inspiration; anxiety and irascibility.

*Dose:* In every respect as directed for Pulsatilla.

NUX-VOMICA is adapted to individuals of an irritable temper, in whom this affection owes its origin to a hæmorrhoidal suppression, a fit of passion, or exposure to cold. It is further indicated by dry cough, which causes headache, with excessive tickling in the chest, and exacerbation of the symptoms towards morning.

*Dose:* Four pills in a teaspoonful of water, night and morning, for a week, then pause four days, after which repeat the same course if yet requisite, and so on until permanent relief or change ensues.

**RHUS.**—When the blood expectorated is of a bright-red, the mind much agitated, and the patient irritable and rendered worse after the slightest vexation or contradiction.

*Dose:* In all respects as directed for Nux-vonica.

**ARNICA-MONTANA** is principally useful in cases arising from external injury, such as a severe blow on the chest, or from lifting a heavy weight, or any other exertion, even blowing wind instruments; but also in almost all cases where the stethoscope detects effusion of blood into the air-cells, attended with a sensation of constriction and burning in the chest, pain as from contusion in the back and shoulder-blades, and difficulty of breathing. Moreover, profuse expectoration of dark-colored blood or clots, brought up without much exertion, or bright, frothy blood, mixed with mucus and clots; sensation of tickling behind the breast-bone; general heat, great weakness, and fainting.

*Dose:* Of a solution of eight globules to three table-spoonsful of water, give a teaspoonful every hour, until six doses have been given, and then every six hours until manifest improvement or change.

#### TREATMENT OF VERY SEVERE CASES.

**ACONITUM** is often found most serviceable in warding off an attack, by the great power which it possesses in controlling the circulation, and is indicated, *precious to the paroxysm*, by the premonitory symptoms of shivering, with accelerated pulse, palpitation of the heart, a sensation of ebullition of blood in the chest, with burning and fullness in the same region; paleness and expression of anxiety in the face; great anguish and anxiety, aggravated by lying down; or *during the attack*, when the expectoration is profuse, coming on in gushes, and excited by a slight, dry cough.

*Dose:* Four pills in a teaspoonful of water, repeated at intervals of two hours, until manifest change.

**IPECACUANHA** is required when a taste of blood remains in the mouth a few hours after the employment of Aconite has been commenced, and there is frequent cough, with nausea, weakness, and expectoration streaked with blood. In some instances in which neither this remedy nor Arsenicum avails *singly* to subdue the symptoms, the *alternate* administration of both has been resorted to with admirable results.

*Dose:* If *singly*, six pills in a teaspoonful of water, repeated at intervals of an hour, until change. If in *alternation* with Arsenicum, a solution of eight pills of each, separately, to four table-spoonsful of water, administered by table-spoonsful every half hour in rotation, until manifest improvement or change.

**ARSENICUM** becomes necessary when the *anxiety, anguish*, and palpitation of the heart increase, notwithstanding the previous administration of Aconite or Ipecacuanha (or both); and when, in addition, we find extreme restlessness, and general, dry, burning heat.

*Dose:* If *singly*, four pills in a teaspoonful of water every hour. If in alternation with Ipecacuanha, as directed for that medicine, above.

**SULPHUR**, followed by the subsequent administration of Arnica, is of essential service in cases in which the *Spitting of Blood* recurs, after hav-

ing previously yielded (with the associated symptoms) to the action of the foregoing medicines.

*Dose:* Three pills of Sulphur in a teaspoonful of water, repeated in three hours, and followed by a pause of six hours, and then by the consecutive administration of similar doses of Arnica every three hours, until manifest improvement or change results.

CHINA is one of our best remedies in restoring the vital energies of the patient, after considerable loss of fluids, whether blood or other secretions; it is, therefore, particularly efficacious *after* a severe attack of this affection; but it is also indicated *during* its course, when the spitting of blood takes place after *violent* cough, or when there is a continual taste of blood in the mouth, or when we find shivering alternately with access of heat, frequent and short-lived perspirations, tremor, and confusion of vision, with a sensation of vacuity or lightness in the head, weakness, and desire to remain constantly recumbent.

*Dose:* If against actual discharge of blood, give six pills in a teaspoonful of water, every hour, until change. If as a restorative agent *after* an acute attack, give four pills in a tablespoonful of water, night and morning, until manifest improvement or change.

FERRUM-METALLICUM may be exhibited with advantage after China, in severe cases, and when the fourth dose of the last named medicine has been productive only of partial effect; or may be preferred if the expectation follow a *slight* cough, and is scanty, but consists of pure bright-red blood, attended with pain between the shoulder-blades, with inability to remain long in a sitting posture; the patient feels the concomitant symptoms relieved by movement, but is speedily fatigued, especially by conversation.

*Dose:* If against actual discharge of blood, six pills; if as a restorative remedy, four globules, as directed for China.

## ACUTE BRONCHITIS.

### INFLAMMATION OF THE MUCOUS MEMBRANE OF THE BRONCHIAL TUBES.

**HISTORY.** Acute bronchitis is one of the most frequent diseases of the human kind generally. It is not generally a dangerous disease when attacking middle-aged persons; it is on the contrary very dangerous to children and old people, and therefore constitutes one of the most important diseases of these two periods of human existence. It is undeniable that the first years of childhood are peculiarly predisposed to this disease. A predisposition of this kind likewise exists among persons of a more advanced age, and may almost always be attributed to the following circumstances: An effeminate mode of living, without adequate exercise in the open air, and not admitting of a free and easy respiration; constitutional diseases, even such as do not emaciate and debilitate the system, more especially scrofula and consumptive, irritability of the mucus membrane in consequence of frequent attacks of bronchitis; acute and chronic diseases of the lungs.

The exciting causes cannot well be traced with positive certainty. A

cold and consequent suppression of the perspiration is undoubtedly one of the most ordinary causes, but not quite as common as is generally supposed. The atmosphere doubtless exerts a powerful influence not only in consequence of rapid changes in the temperature, but principally through the changes in atmospheric electricity, and, as modern investigations seem to have confirmed, through consequent changes in the amount of ozone in the atmosphere. This becomes so much more probable, if we observe that a large number of cases of bronchitis are not so much caused by a damp and cold, as by a dry and cold wind, such as prevails in our region of country when the wind blows from the northwest and north. If the temperature of the wind were the main cause of the trouble, an east wind would cause bronchitis most easily, which is certainly not the case. An epidemic bronchitis spreading over a large tract of country and being even considered contagions, the so-called influenza or grippe, depends upon conditions which we designate as miasmatic, but of the true nature of which we are as yet ignorant. Secondary bronchitis develops itself secondarily in persons afflicted with heart disease, congestion of the lungs or during the presence of acute exanthems (measles, scarlet fever, etc), or various intensely acute constitutional diseases.

The lighter form of bronchitis, generally designated as bronchial catarrh, frequently sets in without any fever; at any rate generally it is scarcely perceptible; sometimes no fever at all is present or the fever is at most indicated by a succession of creeping chills. This form of bronchitis scarcely ever exists isolatedly, but is almost always attended with catarrh of the nose and larynx. After experiencing a feeling of malaise for several hours, and a marked sensation of languor, the patients are attacked with a dry and spasmodic cough attended with a raw or sore feeling in the chest; at the same time the breathing is somewhat oppressed and there is no expectoration at the outset of the disease. The appetite is less, but not gone, the tongue is not always coated; the patients are able to remain up, but feel drowsy and often complain of violent headache. Very often the cough remains dry for a long time, but more frequently a tenacious, greenish-yellow scanty expectoration commences on the second day, which it is very difficult to hawk up. At the end of three to nine days, very rarely at a later period, and then only if the patients neglect themselves, the expectoration becomes more copious, whiter, lumpy, and is raised more easily, the normal feeling of health is restored, and, while the cough is gradually decreasing, the disease passes off. The attack seems so slight, that many patients go about as usual, but, by pursuing this course, expose themselves to relapses which are very apt to take place and beget a tendency towards the inflammatory form of bronchitis, or else originate the consequences that will be more fully described in a subsequent paragraph.

#### INFLAMMATORY OR ACUTE BRONCHITIS.

This form of bronchitis which is marked by much more violent phenomena, is not by any means a purely simple form of bronchitis of a higher degree of intensity. It does not, ordinarily, result from an existing catarrh of the upper respiratory organs, unless the catarrh is suddenly and violently increased by severe neglect; but most generally it occurs



as a primary disease. It generally commences with a violent chill, which is distinguished from the chill that initiates acute inflammations, by the circumstance that it is not followed by as high an increase of temperature, and that there is a frequent recurrence of the chill, especially on motion. The patient feels very weary and languid, complains most generally of a violent headache, exhibits frequent changes of complexion, experiences a rheumatic drawing in the limbs and great restlessness, and is scarcely ever capable of remaining out of bed. Very soon these general symptoms, which do not point out more particularly the locality of the disease, are followed by a burning, sore pain in the chest under the sternum at every deep inspiration, which is felt more severely when coughing. The cough sets in at the same time as the pain is felt; it is more or less violent, sometimes spasmodic, at first dry but not hoarse, but very soon accompanied by the above-described expectoration. There is no dyspnoea, properly speaking, but the breathing is more labored, less full, and hence somewhat more hurried. The pulse is accelerated, but it is only in the severe grades of the disease that it exceeds one hundred pulsations. In this form of bronchitis, the digestive organs are always involved, the appetite is entirely gone, the bowels are constipated, there is seldom any vomiting.

Even in simple bronchitis, when not complicated with tubercles, the expectoration is easily tinged with blood, whereas raising a quantity of pure blood is a rare occurrence and always points to a more dangerous and more deep-seated constitutional disease. All the phenomena, especially the cough, exacerbated in the evening and about midnight. The further course of the disease is governed by a variety of circumstances. The importance of bronchitis of any degree in the case of tuberculous consumptive patients; will be more fully inquired into when we come to treat of consumption.

In favorable cases, uncomplicated forms of bronchitis terminate in four or five days, or exceptionally at an earlier period, in simple bronchial catarrh. The general symptoms moderate in intensity, the fever abates almost entirely, the expectoration becomes more profuse, more fluid, of a whitish-gray color, and is more easily raised by the cough which is now much less painful. The patients do not often feel well again before the tenth day. If the course of the disease is less favorable, its different phases are either more protracted, or else other morbid conditions become associated with it. In the former case, the dry, spasmodic, distressing cough may last beyond the seventh or even to the fourteenth day, after which the period of a more profuse secretion of mucus lasts equally long. Although this longer duration of the disease shows, as a rule, that it is of a secondary nature, yet a purely primary form of bronchitis may run an equally long course, an occurrence peculiar to old age.

The patient's age exerts a greatly modifying influence over the course of the disease, as well as over its danger to life. Among old people, or only somewhat advanced in age, the danger is quite considerable, and seems to depend more particularly upon the increased liability of the bronchial mucous lining to swell, upon the profuse quantity of the secretion at the same time as the respiratory process becomes feebler, and upon the consequently increased danger of œdema of the lungs.

Hence the bronchitis of old people differs greatly from that which we have described in the preceding paragraphs. The disease originates in the same manner, only the fever symptoms seem to be less violent. The pulse soon becomes smaller and weaker, the skin becomes moist and cool, the tongue dry and brown, and the senses are powerfully affected by the disease: sopor, delirium and grasping at flocks, setting in. In this manner the patient may succumb to the disease in a few days, the increase of the mucous rales (rattle) and the decrease and final and total cessation of the expectoration constituting the most ominous signs of approaching dissolution.

One of the most common terminations of bronchitis is chronic bronchial catarrh which succeeds the acute form the more rarely, the younger and healthier the individual.

Having described the other forms of bronchitis, we here devote a few lines to a description of infantile bronchitis, which, as regards its course and importance, differs most essentially from the corresponding bronchitis of adults.

An inflammation of the larger bronchial tubes, be it slight or severe, has almost the same phenomena in the case of children as in that of adults, except that the fever is much more violent and the breathing is in almost every case interfered with very considerably, at an early period. The importance of this process, in the case of children, is much greater than in that of adults, for the reason that in the former it is apt to spread to the smaller bronchial tubes, after which the children who at first gave no cause for alarm, suddenly appear attacked by a dangerous disease.

The symptomatic development generally takes place as follows: After the children have had for some days a simple catarrh, attended with severe fever, the breathing becomes more hurried and, progressively, more oppressed, and the children become more and more restless and anxious. The respiration, during inspirations as well as expirations, now becomes wheezing, more especially during an inspiration. The cough continues to increase in vehemence, without anything being expectorated; or, if anything is raised, it is only with great difficulty a small quantity of mucus which is swallowed again as soon as raised. The general organism, in such a severe disease, is of course correspondingly affected. The difficulty of breathing now increases from hour to hour, and soon reaches a degree of intensity that is in no respect inferior to the worst attack of croup, and becomes still more distressing in consequence of the unceasing efforts on the part of the children to obtain relief by coughing. The pulse becomes frequent and small, the skin on the extremities and head is covered with perspiration, the face is pallid or livid, becomes bluish during an attack of cough, the anxiety and restlessness reach the highest degree of intensity. If, at this stage of the disease, there is no improvement by an increase of the expectoration and a relief from the difficulty of breathing, the disease presents the same picture as in the last stage of croup, only the hissing sound caused by the stricture of the glottis is wanting. The children become calmer, pallid and cool, they are lying in a state of unconsciousness or sopor, the respiration becomes very superficial, the paroxysms of cough abate more and more, and the

children die comatose. This fatal termination sometimes takes place in the first week of the disease, less frequently after the fourteenth day.

Recovery always takes place slowly, the liability to relapses is very great; the strength does not easily return, and the cough sometimes continues for many weeks. The diagnosis is only difficult in the case of very small children; here the characteristic cough is almost always entirely absent, in general the reaction against the disease is either slight or non-apparent. The prognosis is the more doubtful the younger the patient. That dentition complicates the prognosis, cannot be taken for granted. The greater liability to the disease, at this period, is probably owing to the increased susceptibilities of the infantile organism.

#### ALLOPATHIC TREATMENT.

A common catarrh or cold affecting the bronchial tubes, is known to physicians as Acute Bronchitis. It frequently begins as a coryza (catarrh or cold in the head) and may often be cut short by a full opiate and a diaphoretic (medicines which produce sweating). A remedy which fulfills these indications the best is the Dover's Powder (Compound Powder of Ipecacuanha.) It may be given in doses of ten to fifteen grains at bedtime. Twenty or thirty drops of Laudanum, a quarter of a grain of morphine, or half a grain of Codia may be given instead. The proper time to take this remedy is before going to bed. It should be accompanied with a hot foot bath, and a copious drink of ginger tea. The next morning a free cathartic should be given as a Scidlitz Powder, or a tablespoonful of Rochelle Salts in lemonade, or a tablespoonful of Citrate of Magnesia, or a tablespoonful of Epsom Salts. (The disagreeable taste of Epsom Salts is removed by boiling with one-third of its bulk of roasted coffee in an earthen vessel for a couple of minutes, then let it draw a few minutes and strain.) This plan of treatment is effectual in stopping or lessening the effects of a cold.

If the disease becomes established, it will yield more readily if the patient remains in bed to secure uniform warmth and moisture of the skin.

In severe cases the room should be charged with steam in the manner described for croup.

If there is much pain or soreness of the chest, a mustard plaster or a liniment of one part of Aqua Ammonia, two parts Olive Oil and one part Spirits Turpentine, will be found useful. Spirits Turpentine alone or with an equal part Spirits Camphor may be used for this purpose with equal benefit.

Three to ten drops of the Fluid Extract, or teaspoonful doses of the Syrup of Ipecacuanha, or ten drops to half a teaspoonful of Hive Syrup, can be given at such intervals through the day, as will keep the skin slightly moist. Morphine in doses of a twelfth to an eighth of a grain, or Paregoric in doses of a teaspoonful, may be given three or four times or oftener during the day to relieve cough.

I find a mixture of equal parts of Paregoric, Tincture of Hyoscyamus and Fluid Extract of Wild Cherry Bark, in doses of one or two teaspoonful, an exceedingly efficacious remedy for the relief of cough in all forms

of Bronchitis; if the Fluid Extract of Wild Cherry Bark has been deprived of astringency as is done by Chapman, Green & Co., of Chicago, the remedy is an agreeable one to take.

In case there is fever with the attack, or much secretion of mucus, Aconite may be used with the best effect and is not incompatible with other treatment which may be needed. The Tincture of Aconite may be given in doses of half a drop or a drop every half hour, until an impression is made on the fever movement and then continue in doses of a drop every hour or two or three hours. In the continued use of the Aconite, if the bronchial secretion is very profuse, the Tincture of Belladonna may be given with it as follows: Take of Tincture of Aconite a dram, Tincture of Belladonna two drams; mix.

*Dose:* Three or four drops from one to three hours apart.

If the inflammation linger and appear disposed to become chronic, Quinine should be given in doses of two or three grains three times a day. If the patient is pale and feeble, fifteen or twenty drops of the Tincture Muriate of Iron should be given with a dessertspoonful of a saturated solution of Chlorate of Potash in syrup enough to make a pleasant mixture, after each meal. The diet should be nutritious.

Warm clothing, hearty food, and life in the open air are the best preventives against "taking cold."

Some points in the treatment of Acute Bronchitis in young children require special consideration.

Young children do not expectorate (throw the phlegm off from the bronchial tubes) and suffocation may be caused from its accumulation. This may be supplied in the act of vomiting. An occasional emetic should therefore be given. Teaspoonful doses of the syrup of Ipecacuanha.

The emetic should be repeated every day or oftener, or when the breathing becomes impeded by the accumulation of phlegm. After vomiting is produced no nauseant medicines should be given until vomiting is again required. A warm bath should be given at the commencement of the disease. This, with an emetic in the first twelve hours, may cut the attack short.

The chest should be wrapped with a flannel saturated with Camphor Oil (Olive Oil containing twenty or thirty grains of Gum Camphor to the ounce) and this covered with muslin. If this oil does not redden the skin, a little Turpentine may be added until it does; or a *thin* poultice made of flax-seed meal, containing one-sixteenth part of pulverized mustard may be applied to the chest and covered with oiled muslin. Or one or two grains of powdered Ipecac may be given in water and repeated every fifteen minutes until vomiting occurs; Alum may be given with the Ipecac in doses of a teaspoonful if vomiting does not soon produce an emesis.

The bowels should be moved regularly, and if this does not occur naturally a laxative should be given. Castor Oil with an equal quantity of Glycerine flavored with a couple of drops Oil of Gaultheria or Cinnamon to each dose may be used for this purpose in doses of one or two teaspoonsful.



For constitutional treatment the following formula may be used: Take of Syrup of Squills two drams, Acetate of Potash half a dram, Syrup of Tolu, and Anise water, each seven drams. Mix, and give a child of six months or a year, a teaspoonful every three or four hours. Twenty or thirty drops of Tincture of Bloodroot may be added to this formula. If the kidneys or skin are not acting freely twenty or thirty drops of Spirits Mendivees may be given at the same time or separately.

Opiates ought not to be given with any freedom, but if there is much cough or restlessness it should be relieved with from fifteen to thirty drops of the mixture of Paregoric, Hyoscyamus and Wild Cherry Bark, as spoken of in the treatment of adults, at such intervals as is required; it may be given in the syrup above written.

If there is much fever and the child is two years old or over, eight to twelve drops of Tincture of Aconite root may be also added to the above syrup mixture.

The patient should be allowed the breast freely and have in addition, if that is insufficient, creamy milk, juice of lean meat, or strong beef tea.

The object of treatment is to supply the lack of expectoration by the proper use of emetics, to support the powers of life by nutritious food, and diminish the congestion of the bronchial mucous membrane by warm and mildly irritating applications and by diaphoretics, laxatives, and last and least anodynes.

The treatment of Capillary Bronchitis, i. e. in the small bronchial tubes, does not differ essentially from the treatment of ordinary Bronchitis, except that as the disease is infinitely more grave, much more attention must be given to supporting the strength of the patient, and, in children, relieving the lungs of mucus, by the use of emetics.

When the fever runs high Aconite should be given as before directed. In capillary bronchitis Snakeroot, Carbonate of Ammonia and Iodide of Potassium seems especially useful.

Take of Fluid Extract of Snakeroot an ounce, Carbonate of Ammonia a dram, Iodide of Potassium a dram and a half, Syrup of Tolu and Water each an ounce and a half. Mix.

*Dose:* A teaspoonful for a child and a tablespoonful for an adult three or four hours apart.

#### HOMOEOPATHIC TREATMENT.

**ACONITUM.** Marked indications are, *hot, dry skin, with strong, hard, and accelerated pulse*; roughness of the voice; short, dry, and frequent cough, excited by tickling in the throat and chest; *obstructed respiration*, wheezing or sonorous noise in the chest; anxiety; restlessness, headache, and thirst, with occasional, scanty expectoration of a sticky phlegm.

*Dose:* Of a solution of six pills to two tablespoonsful of water, give a teaspoonful, repeated at intervals of an hour, until the indicative symptoms are allayed.

**BRYONIA** is of great service, in a large number of cases of bronchitis, at the commencement of the attack, and should be administered two hours

after the third dose of *Aconitum*, in the event of the unmodified continuance of the fever-symptoms,—the following indications being present: laborious, rapid, and anxious breathing, with constant inclinations to make a deep inspiration; hoarseness; headache; dry cough, attended with a burning, pricking pain, extending from the throat to the middle of the breast-bone; or cough, day and night, with scanty and difficult expectoration of viscid, white or yellow-colored phlegm, in some instances tinged with blood; wheezing; *dryness of the mouth and lips*; hot, dry skin, or dryness of the skin during the day, and copious perspiration at night; excessive thirst. When a pain as if arising from the effects of a bruise, is experienced under the breast-bone, with aching and sensation as if the contents of the cranium would be forced through the forehead, after each fit of coughing, or when the breathing is impeded by shootings in the chest, and the affection threatens to become complicated with pleurisy, this remedy is still more particularly called for.

*Dose:* A solution of six pills, as directed for *Aconitum*.

SPONGIA is often of great service after the previous administration of *Aconite*, when there still remains a considerable degree of inflammation in the air-tubes, especially the larger, with wheezing or sonorous noise in the chest; and also at a more advanced stage of the disease, when rattling of mucus is distinctly audible; hollow, dry cough day and night, but worse towards evening; or cough with scanty, viscid, ropy expectoration; heat in the chest; burning, tickling irritation in the top of the windpipe; quick, anxious, laborious respiration; inability to breathe unless the head is thrown backwards; hoarseness.

*Dose:* Of a solution of six pills to two table spoonful of water, give a teaspoonful every two hours.

BELLADONNA. This remedy is useful when there is severe headache, materially aggravated by coughing; flushed face; *oppression of the chest*, and constriction, as if bound, with loud wheezing and rattling of mucus in the air-tubes; short, anxious, and rapid breathing, dry, fatiguing cough, especially at night, which is endeavored to be suppressed on account of the pains which it creates; heat of the skin, and thirst; soreness of the throat. *Belladonna* is often exceedingly efficacious in children, particularly in those insidious cases which commence with a slight wheezing, and then suddenly become aggravated to such a degree as to threaten suffocation; the heat of the skin being at the same time considerable, and the pulse excessively rapid, and sometimes even intermittent.

*Dose:* Of a solution of six pills to two table spoonful of water, give a teaspoonful every three hours.

MERCURIUS. This remedy may occasionally be found useful in the second or secretive stage, when the symptoms of bronchitis are accompanied by excessive perspiration; when the cough is fatiguing, worse in the evening and at night, and excited by a tickling irritation, or sensation of dryness in the chest, with quick, short, oppressed breathing, and louder breathing than ordinary; hoarseness; cold in the head, with watery, acrid discharge; swelling of the nose.

*Dose:* As for *Belladonna*.

PHOSPHORUS. This important remedy is frequently of great utility in

bronchitis, when the more inflammatory symptoms have been subdued by Aconite, but the breathing continues much oppressed, accompanied with great anxiety, and heat in the chest; dry cough, excited by tickling in the throat or chest, aggravated by talking or laughing, and followed by expectoration of stringy phlegm of a saltish taste. Further, when the disease has been neglected, or when, from the symptoms which present themselves at the commencement, we have reason to dread complication, or an extension of the inflammation to the substance of the lungs, there will be additional reason for administering Phosphorus.

*Dose:* Four pills in a teaspoonful of water every four hours, until distinct change.

**PULSATILLA.** This remedy is often required in the second or secretive stage to complete the cure, after the previous exhibition of Aconitum, when the acute inflammatory symptoms have been subdued, and the expectoration has become thicker and more copious. It may, however, be prescribed before or after any of the medicines we have named, especially when the disease occurs in persons of mild disposition, or lymphatic constitution, and the symptoms are as follow: breathing short, accelerated, and impeded, attended with rattling of phlegm, heat in the chest, and anxiety; hoarseness; shaking cough, worse towards evening, at night, or in the morning, accompanied with considerable expectoration of tenacious, or thick, yellowish phlegm, sometimes mixed with blood; cold in the head, with copious discharge of *thick*, discolored phlegm.

*Dose:* Of a solution of six pills to two tablepoonsful of water, give a teaspoonful every two hours, until improvement, or change. If *improvement* occur, the intervals should be extended to six hours, and the administration thus continued, until the subsidence of the symptoms.

#### BRONCHITIS IN CHILDREN.

**CHAMOMILLA** is often a most useful remedy after the previous exhibition of *Aconitum* in cases occurring amongst *children*, when a slight degree of whistling or sonorous noise in the chest still remains; dry cough, worse at night, occurring even during sleep. (See also Belladonna.)

*Dose:* Four pills in a teaspoonful of water, given every three hours.

**IPECACUANHA** is also a very serviceable remedy for *children*, when there is wheezing or rattling in the chest, and when on coughing they are almost suffocated by the excessive secretion of phlegm, and become livid in the face; shortness of breath and perspiration on the forehead after each fit of coughing.

*Dose:* Same as Chamomilla.

**ARSENICUM** should be given two hours after the third dose of *Ipecacuanha*, if the latter remedy has only been productive of partial benefit, and is indeed to be selected in preference to *Ipecac*, if the following indications occur; the pulse very quick, feeble, and irregular, and the patient reduced to a state of extreme debility and collapse, the breathing obstructed almost to suffocation and attended with a *wheezing* and *whistling* noise in the chest, cough and hoarseness.

*Dose:* Of a solution of eight globules, to four teaspoonsful of water, give a teaspoonful (or two globules dry on the tongue), at intervals of five, ten, fifteen, and twenty minutes, and so on, adding five minutes to the length of each succeeding interval.

## CHRONIC BRONCHITIS.

## CHRONIC PULMONARY OR BRONCHIAL CATARRH.

In the majority of cases chronic bronchitis owes its existence to one or more attacks of acute bronchitis out of which it arises by gradual development. Even as thus arising as a secondary disease, the affection is exceedingly frequent, but this frequency is still more increased by the circumstance that it accompanies most of the material changes of structure in the lungs, particularly consumption, and that it likewise occurs as a complication of diseases of other organs. The latter occurs more particularly in diseases of organs that obstruct the return of the blood from the lungs, such as heart disease and affection of the liver. As a primary disease, chronic bronchitis is more particularly met with among persons who are upwards of forty-five years old; every chronic pulmonary catarrh of young people excites a well-founded suspicion that it emanates from some other pulmonary disease as its source. Men are much more frequently afflicted with chronic bronchitis than women; children are seldom attacked. In northern climates, chronic pulmonary catarrh becomes much more frequent; in the countries with a damp and cold climate it is almost endemic; it likewise prevails among individuals whose business confines them to damp and cold places. Persons who have to inhale a good deal of dust during their work, such as stone-cutters, millers, and sculptors, are likewise exposed to frequent attacks of chronic bronchitis. Smoking is likewise a frequent cause of this disease. The use of tobacco causes chronic catarrh of the bronchial lining membrane much more frequently than one imagines, without any acute attack having preceded the chronic form.

Considering our mode of living, and when affecting persons beyond the age of fifty, the milder cases of chronic bronchial catarrh do not present any marked symptoms. The parties cough a little, most generally in the morning, and after that they expectorate some, but assimilation is not affected by the disease, nor is the respiratory process interfered with, and the condition sometimes remains unchanged for years. The more violent cases, on the contrary, cause constant and most commonly increasing trouble.

After the termination of an acute bronchial catarrh,—for chronic catarrh seldom sets in gradually without any preliminary acute stage,—cough and expectoration remain and continue with slight variations until made worse again by another acute attack. The cough is marked by two essentially distinct features. If the bronchial secretion is scanty, tenacious and firmly adhering, the paroxysms of cough occur less frequently, but in such a case the cough is most severely spasmodic and not unfrequently leads to gagging and vomiting. The paroxysms occur most frequently at night, less commonly in the day-time. After violent exertions, some of the above-described mucus is expelled; sometimes a little mucus is now hawked up till some time after the cough. If the secretion is more copious, the cough sets in chiefly in the morning-hours or after the use of warm food; it may continue for a long time, but is not spasmodic, for after a few energetic spells of cough, the mucus is detached and expectorated.



Sooner or later the cough becomes associated with more or less violent oppression of breathing, which may even creep along without being perceived, and corresponds with the increasing thickening of the bronchial mucous membrane, a diminution of its elasticity and the copious quantity of the secretion. At first this oppression is only perceived by the patients when making an effort, during a rapid walk, going up hill; soon, however, it is felt even during an ordinary walk, even during rest, and causes a great deal of annoyance. In the higher grades of the disease, the patients are threatened during the paroxysm of cough with danger of suffocation; even between the paroxysms the nature of the existing affection is revealed at first sight by the elevated thorax and consequent shortening of the neck. The most intense pain, however, is endured by the patients if an acute aggravation of the disease takes place. Under such circumstances they exhibit such a picture of distress, that it seems as though they could not possibly live longer than twenty-four hours. These acute exacerbations occur almost certainly once at least every spring and fall, even if the patients have not knowingly been exposed or have not even left their room.

In the beginning the general organism is not affected by the complaint, even tolerably severe forms of this disease are borne for a long time without any perceptible detriment. Very seldom, and only if the secretion is very profuse, emaciation gradually supervenes, in spite of which the patients may live, however, for many years. The greatest danger is occasioned by the influence exerted by the impended respiration over the circulation. The functions of the heart become abnormal; the deficiency of blood in the lungs and its imperfect aeration either cause passive congestion of the liver, and a corresponding chronic intestinal catarrh, or disturbances in the functions of the spleen or kidneys, or passive congestion of the brain with its inherent dangers, so that it is not without reason that a raised thorax and short neck are designated as an apoplectic habit.

If the catarrh has become an inveterate disease, it is apt to last to the end of life; but that such a noble organ as the lungs should be capable of bearing for so long a time, even a severe degree of an apparently dangerous disease, is indeed remarkable. It is not marasmus, wasting of flesh; the patient need dread, but the constant succession of acute attacks which indeed are rarely immediately fatal; most patients die of this disease amid symptoms of general dropsy. If an acute attack assumes the form of capillary bronchitis or pneumonia, the lives of such patients are indeed in extreme peril.

In recent cases, the prognosis is not altogether unfavorable so far as a cure is concerned; life is very seldom endangered by such a disease. The chances, of course, depend upon what structural changes have taken place, and to what extent. The worst omen is heart-disease, which almost always terminates in dropsy in a very short time.

#### ALLOPATHIC TREATMENT.

In Chronic Bronchitis the general health demands attention in the first place. To this end the diet should be good and nutritious but plain; meat, milk, eggs, fowl, fish, and farinaceous food will be required. As a rule alcoholic stimulants are not to be used. In case of feeble persons Quin-

ine and Iron should be given. The Quinine may be given in pills, and the Muriate Tincture of Iron (the preparation which I prefer) in doses of fifteen or twenty drops, largely diluted in sweetened water three times a day. Cod Liver Oil may be called for, and when there is much secretion the Hypophosphites or Phosphates are serviceable in supporting the patient. If the Compound Syrups are used which contain Iron, the Muriate Tincture of Iron need not be given. Take of the Compound Syrup of Hypophosphites (containing Iron) three and a half ounces, Dilute Phosphoric Acid half an ounce; mix.

*Dose:* A teaspoonful three times a day.

Out of door life is often to be insisted on and sometimes a change of climate is not only beneficial, but necessary, to effect a cure. The surface of the body is to be kept warm and the skin active. Frequent warm baths should be taken, though cool baths are not to be prohibited, if the reaction after them is good and they prove beneficial. Special attention should be given to the clothing. In cold climates woolen or silk underclothing should be worn and the other clothing sufficiently heavy to avoid chilliness. A vest and drawers of chamois or buckskin, worn immediately over the underclothing, affords the required protection and avoids the necessity of an inconvenient weight of clothes in cold weather. This simple device secures a uniform temperature and activity of the skin, which will to a degree relieve the bronchial mucous membrane. Counter irritation is many times a successful means of securing the same result. For this purpose the use of Croton Oil, or a liniment of equal parts of Croton Oil, Turpentine, and Olive Oil, to maintain a slight eruption over the chest, is often very appropriate. Tartar Emetic Ointment (one part of Tartar Emetic to five of Lard) is a suitable preparation. A "warming plaster" is often worn with benefit.

Some medicines often exert a curative influence. The Iodide of Potassium or Ammonium with Fowler's Solution of the Arsenite of Potash as in the following: Take of Iodide of Ammonia or Potassium five drams, Fowler's Solution a dram and a half, Simple Syrup four ounces, Spirits Peppermint half a dram. Mix.

*Dose:* One or two teaspoonsful in water three times a day after eating. If the patient needs Iron a dram of the Pyrophosphate may be added to the mixture.

Muriate of Ammonia is considered by many physicians a valuable remedy in this disease. Licquorice disguises the taste. It may be given as follows: Take of Muriate of Ammonia two drams, Extract of Licquorice two drams, Syrup of Tolu four ounces. Mix.

*Dose:* A teaspoonful in water four to six times a day.

Copaiba often exerts a wonderfully curative effect. It may be given in doses of fifteen or twenty drops three or four times a day. It may be given on sugar or in Aromatic Mucilage, as: Take of Copaiba, Balsam Tolu and Powdered Acacia each an ounce, Aromatic Sulphuric Acid half a dram, Peppermint Water six ounces. Mix.

*Dose:* A tablespoonful three or four times a day.

The remedy is so unpleasant that few take it willingly. Gelatine Cap-

sules of Copaiba, as sold in the drug stores is the most convenient form for many to take the remedy.

Chlorate of Potash in saturated solution given in doses of a teaspoonful to a tablespoonful three or four times a day is often curative. The taste is pleasant if mixed with Syrup. When Iron is required the Muriate Tincture can be given in this solution.

A form of medication which is often useful in cases with profuse secretion, and is adopted largely by quacks, is inhalation. Steam is the simplest and often one of the best. A solution of Morphine one-half to one grain to the ounce of water, Extract of Belladonna in the same proportions, Extract of Hyoscyamus four to five grains to the ounce and inhaled from an atomizer or spray producer, wonderfully relieve the cough and irritation of the bronchial tubes.

Astringent solutions may be used in this way. Tannin from one to twenty grains to the ounce, Alum from five grains to the ounce, to a saturated solution. Morphine can be added to the solution in the strength of one-quarter to one grain, to the ounce if local anodyne effect is desired. Sugar of Lead in solution three to ten grains to the ounce are among the indications appropriate to inhale from the atomizer or spray apparatus.

Should the expectoration be fetid Carbolic Acid—the spray of a solution of Carbolic Acid one to four grains to the ounce, Sulphurous Acid one to four drams to the ounce—may be used. The vapor of Carbolate of Iodine (half an ounce of Tincture of Iodine, Iodide of Potassium fifteen grains, Carbolic Acid one dram) produced by warming the bottle with the hand may be inhaled with advantage. The solution should be weak to begin with and its strength gradually increased as is required.

For anodyne remedies to relieve the cough, if anything is necessary, the preference should be given to Hyoscyamus and Belladonna to the exclusion of Opium, because of the latter deranging the digestion, and the danger from the indefinitely continued use of the drug establishing the opium habit. Tincture of Hyoscyamus in doses of a teaspoonful or Tincture of Belladonna in doses of ten or fifteen drops may be given as often as is required to relieve cough. The mixture of Paregoric, Hyoscyamus and Wild Cherry recommended for Acute Bronchitis may be appropriately used.

The use of Bromide of Potassium, or Ammonium and Chloral Hydrate, is frequently very serviceable in relieving the cough, either alone or given in connection with other anodyne medicines, but most benefit will follow its use when the cough is of a spasmodic character. Take of Bromide of Potassium half an ounce, Chloral Hydrate two drams, Syrup of Tolu two ounces, Water to make the mixture six ounces.

*Dose:* A tablespoonful three or four hours apart.

#### HOMCEOPATHIC TREATMENT.

SULPHUR is, in the majority of cases, one of the principal remedies for the treatment of Chronic Bronchitis. The particular symptoms which serve to indicate its employment, are as follows: dry, racking cough, with spasmodic tightness of the chest, sometimes aggravated by the recumbent

position, and not unfrequently attended with nausea or even vomiting; accumulation of phlegm in the air-tubes, and scraping sensation in the throat; sensation of soreness at the chest; chronic hoarseness, and even loss of voice; aggravation of the generality of the symptoms in raw, damp, cold weather; dry cough at night; or cough with considerable expectoration of thick, whitish or yellowish phlegm, chiefly in the day time; attacks of suffocative sensation and oppression of breath; rattling of phlegm on the chest, and occasional or even frequent palpitation of the heart; pains in the head and chest during fits of coughing; mistiness of sight, and sensation of darting; fullness in the head.

*Dose:* Six pills in a tablespoonful of water, every morning the first thing (fasting), for a week then pause four days, after which the course may, if necessary, be resumed as before, and so on.

CALCAREA-CARB. is more distinctly indicated when the patient is subject, from time to time, to depression of spirits, characterized by exceeding anxiety respecting his or her health, and attended with great languor (often to a distressing degree); stitches, and occasional pains in the chest and in the sides; tickling sensation in the throat, accompanied or followed by dry, violent cough; the last-named symptoms occur especially at night, when in a recumbent position, or even during sleep, or in the evening; prolonged and obstinate hoarseness, to which the patient is much subject, and which is constantly induced by changes of weather; accumulation of adhesive phlegm in the air-tubes, and rattling of phlegm on the chest; sometimes moist cough, with expectoration of offensive phlegm (thick and yellowish).

*Dose:* Six pills, as directed for *Sulphur*.

CARBO-VEG. is more particularly indicated by repeated fits of *spasmodic cough* during the day, and in the evening; pains as of *soreness* in the upper part of the windpipe, or sensation of tickling and *roughness* in the same part; prolonged and intractable hoarseness and roughness of voice, aggravated by talking, or by raw, cold, damp weather, and occurring more particularly in the morning or towards night; rheumatic pains in the chest and limbs; cough with considerable expectoration of *greenish* phlegm.

*Dose:* Six pills in a teaspoonful of water, morning and evening.

PULSATILLA. This medicine is more particularly appropriate when the following symptoms and conditions occur: dry cough, which subsequently becomes moist, and is then characterized by very considerable expectoration of saltish or bitterish phlegm, or of phlegm tinged with blood, or of a yellowish or whitish appearance; soreness of the palate and throat; frequent attacks of chilliness without thirst; yellowish, greenish, or offensive discharge from the nose; hoarseness, or even loss of voice; cough with much expectoration, and with pain on the chest; racking cough exacerbated at night and in a recumbent position, and accompanied with rattling of phlegm, nausea (or even vomiting), and sensation of being stifled, feeling of soreness or contusion about the belly in the act of coughing.

*Dose:* Six pills in a teaspoonful of water, night and morning.

SEPIA is usually of eminent service in such inveterate cases of chronic bronchitis as are characterized by—cough attended with or followed by abundant expectoration of greenish-yellow, matter-like, or even bloody



phlegm of *putrid* or saltish taste, occurring chiefly in the morning and towards night, and accompanied with a sensation of weakness and soreness about the chest; or sometimes dry, spasmodic cough, attended with nausea and resulting in the vomiting of bilious matters,—the cough occurring particularly at night, and being further characterized by difficulty of breathing or *shortness* of breath.

*Dose:* Four pills in a teaspoonful of water, night and morning, for a week, then pause four days, resuming the course after this interval, if necessary, as before, and so on.

CAUSTICUM is also a medicine of much importance in the treatment of this disease, and is more particularly indicated by: aching pains in the limbs, bones in the face and jaws, and in the throat and head, associated with a violent, *racking* cough, of which the fits occur particularly at night; feebleness of voice; hoarseness, or even loss of voice; lacerated and painful sensations in the chest and throat; faltering or feebleness of the lower extremities; rattling of phlegm; watery discharge from the nostrils accompanied with headache; flushing of heat at night, attended with palpitation of the heart; chill during every motion; sometimes nausea, and even vomiting of food with dainty or deficient appetite. The open air provokes or aggravates the symptoms.

*Dose:* Three pills in a teaspoonful of water, morning and evening.

ARSENICUM is a valuable remedy in severe cases, characterized by great debility and languor, particularly if the subjoined symptoms occur: *violent, dry cough*, accompanied with shortness of breath, or even with attacks of apparent suffocation in the evening or at night, and provoked by cold drinks, or by the least exposure to cold air; or moist cough, with accumulation of very adhesive phlegm in the ramifications of the windpipe, which is hawked or coughed up with great difficulty; and general aggravation of the symptoms at night or after eating.

*Dose:* Four pills in a teaspoonful of water, three times a day, until the symptoms become less violent; and then at night and morning.

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## INFLUENZA.

### EPIDEMIC CATARRH.

We apply the name influenza to every bronchitis invading a large surface of country, and involving with marked symptoms of illness the whole organism, more especially the nervous system, attacking a number of individuals in the same epidemic with very similar symptoms, although these may differ ever so much in different epidemics.

Influenza is generally preceded by a preliminary stage where the local symptoms of catarrh of the respiratory organs are still wanting, or are but imperfectly developed, whereas the patient complains very much of an extreme languor, with nervous excitement, sleeplessness and loss of appetite, without or with only slight fever. As the fever increases, the local symptoms become generally more marked and more intense. At times, a coryza is the only prominent symptom, at other times the mucous lining, from the nose to the finest bronchial divisions, is inflamed. At the

same time a violent and constant headache is complained of, which is commonly located in the forehead, and is marked by all the peculiarities that so commonly characterize the headache in an incipient typhus. This headache is accompanied by rheumatic pains in many parts of the muscular system, accompanied by a degree of debility that almost amounts to paralysis. After a gradual, very seldom sudden increase, the disease reaches its full height. The catarrh is at times violent, at other times very slight. The fever is intense, but so plainly remittent that the remissions sometimes appear like intermissions. The debility is excessive. The headache is agonizing, and is either complicated with sopor, or with violent delirium. The digestion is entirely prostrated; the tongue is thickly coated white or yellow, at times it exhibits a sickly redness with disposition to dryness; nausea and even diarrhœa are often present; the bowels are confined, diarrhœa is less frequent. The symptoms exacerbate in the evening and at night, the patient being very much disturbed by the cough which aggravates the headache a great deal. Thus the more violent attacks of influenza simulate an acute typhus, milder cases a so-called nervous gastric fever. Death may take place in the second week amid symptoms of general exhaustion; sometimes it takes place at a later period in consequence of the peculiar secondary diseases which frequently break out as sequelæ of influenza.

In the case of sound, robust individuals, the disease mostly terminates its course in a fortnight, but always leaving an extreme weakness which may last for weeks. In the case of old people the danger is always great, and recovery takes place very slowly. An abatement of the fever is always the surest sign of an improvement. The disease very often leaves very threatening results, such as diseases of the lungs, stomach and liver.

Thus we see that the prognosis in influenza is uncertain, even if the disease sets in favorably at first, and the patient had been in the habitual enjoyment of good health. If the individual had pulmonary disease, or in the case of old persons, a fatal termination is not uncommon. The peculiar nature of the actually existing epidemic may likewise exert a great influence; whereas, one epidemic scarcely destroys a single life, another epidemic, on the contrary, claims a great many victims.

#### ALLOPATHIC TREATMENT.

In Epidemic Bronchitis or Influenza, in addition to the treatment given for ordinary Bronchitis, tonic doses of Quinine, two or three grains three times a day, should be given. If the patient is feeble, Tincture Muriate of Iron is needed, in doses of ten to twenty drops in sweetened water, after each meal. The writer is of the opinion that Fowler's Solution, in doses of five to ten drops, and the Iodide of Potassium in doses of fifteen or twenty grains, three times a day, is beneficial; they can be given in syrup and water with sarsaparilla and peppermint.

#### HOMŒOPATHIC TREATMENT.

##### INCIPIENT STAGE.

CAMPHOR (saturated tincture). This medicine, when employed upon the earliest manifestation of symptoms of Influenza (or of Common Cold

during the prevalence of Influenza), characterized by chilliness, shivering, and general sensation of uneasiness, will frequently prove effectual in arresting the further development of the disease. In a more advanced stage, moreover, Camphor is equally indicated, and is often of great service, when laborious, *asthmatic* breathing, accumulation of phlegm in the air-tubes, and *cold, dry* skin occur as predominant symptoms.

*Dose:* One drop of the saturated tincture on a small lump of fine loaf-sugar, repeated at intervals of one hour.

**NUX-VOMICA.** This remedy has also repeatedly proven of great efficacy in the first stage of influenza; and, frequently, when timely administered, in the cases in which it is indicated, prevents the development of the disease. The symptoms which point out the fitness of Nux-v. are chiefly as follow: obstruction of the nose; hoarse hollow cough, excited by tickling in the throat, and attended with severe headache; confusion in the head, giddiness; want of appetite, disgust at food, acid taste, or vomiting of bitter or acid matter; thirst; pain as from a bruise under the short ribs; aching pain in the lower part of the back; constipation; pain in the chest as if from excoriation; alternate heats and chills; general aching and prostration; sleeplessness, nocturnal excitement, and restlessness; pains in the face and teeth.

*Dose:* Six pills in a teaspoonful of water, three times a day.

#### INFLAMMATORY STAGE.

**ACONITUM** is indicated for children when the disorder assumes an inflammatory character, with quickness, hardness, and fullness of pulse, dry, hot skin, and short, harsh, shaking cough.

*Dose:* Of a solution of six pills to two tablespoonsful of water, give a teaspoonful every three hours, until fever symptoms abate.

**ARSENICUM.** The following are the characteristic indications for the employment of this important remedy: heaviness and rheumatic pain in the head; *profuse, watery and corrosive discharge from the nose*, causing a disagreeable burning sensation in the nostrils; violent sneezing; shivering and shudderings, with severe pains in the limbs; *oppression of the chest*; difficulty of breathing; thirst; anxiety; restlessness; **GREAT PROSTRATION OF STRENGTH**, with aggravation of sufferings at night, or after a meal; inflammation of the eyes, with sensibility to light. These symptoms may be attended with a deep, *dry*, fatiguing cough, worse in the evening, at night, or after drinking; or with sensations of dryness and burning, with mucus in the throat, which is difficult to detach.

*Dose:* Two pills in a teaspoonful of water, every two hours, until the symptoms are moderated, and then every six hours.

**MERCURIUS.**—This remedy is indicated by the following symptoms: *chilliness*, followed by *profuse perspiration*, unattended by mitigation of suffering; severe cold in the head, with copious, acrid, watery discharge; fever, with general heat; great weakness, relaxed bowels, headache; *pains in the head, face, teeth, and chest*; sore throat; swelling of the glands beneath the ear; violent, shaking cough, at first dry, but subsequently moist, with copious secretion of phlegm—the paroxysms of

coughing being commonly excited by irritation in the throat and chest; aching in the bones, and slimy, bilious diarrhœa, attended with straining.

*Dose:* As for Aconite.

PHOSPHORUS has been found exceedingly useful when there was excessive irritation in the windpipe and its ramifications, bordering on inflammation, with alteration of the voice, and pain during speech.

*Dose:* Six pills in a teaspoonful of water, every three hours.

BRYONIA has proved of great service in relieving the violent, pressive aching, bursting, frontal headache, dry, hot skin, with or without fever, and cough, both day and night, with scanty or copious, easily loosened, white or yellow-colored phlegm; or when the cough produced pain in the upper part of the belly, and caused a pain, as if arising from the effects of a blow, beneath the breast-bone or under the short ribs. It has further been found of great efficacy when the liver was tumefied, painful to the touch, or on coughing, or taking a full inspiration; also when vomiting was liable to take place after coughing.

*Dose:* Of a solution of eight pills to four teaspoonsful of water, give a teaspoonful every four hours.

OPIUM has, in some cases, been successfully employed, when other remedies had failed, against distressing, dry cough, or cough with difficulty in expectorating the phlegm which has been detached, the paroxysms of which were always followed by yawning.

*Dose:* Six pills in a teaspoonful of water, every four hours.



## WHOOPIING-COUGH.

### TUSSIS CONVULSIVA, PERTUSSIS.

Whooping-cough is an epidemic disease which sometimes occurs in the form of very extensive, and sometimes circumscribed epidemics, in which latter case the few cases of whooping-cough might be called local. So far the real cause of the epidemic has not yet been determined. A connection with other epidemic affections, especially measles, and likewise with smallpox and scarlatina cannot well be denied. Whooping-cough frequently precedes or succeeds epidemics of the last-named diseases, and in rare cases accompanies them.

In the majority of cases whooping-cough commences as an ordinary catarrh of the nose or of the larynx, trachea and bronchial tubes. This introductory catarrh which does not, properly speaking, form a component part of whooping-cough, may break out in all degrees of severity and extent without this circumstance justifying a conclusion regarding the approaching attack. Hence the most proper course would be to regard this preliminary catarrh as connected with the epidemic only in so far as it furnishes a soil or a susceptible spot upon which the whooping-cough miasm can be grafted, and in which it can germinate. This is shown by the cases where the whooping-cough breaks out without being ushered in



by a simply catarrhal stage, or where a simple catarrh exists for weeks before it is converted into whooping-cough. At any one period of this first stage, in a few days or even after the lapse of weeks either a harmlessly-sounding cough sets in or else an actually-existing cough becomes more severe, and sooner or later assumes a paroxysmal character which constitutes it whooping-cough. After this form of cough has reached its full development, the simple cough ceases entirely; only in a few instances violent paroxysms and simple turns of cough occur mingled together. A single paroxysm has the following characteristic symptoms: The children who had hitherto been bright and cheerful, shortly before the setting in of the paroxysm, become restless and anxious, or, if old enough, they complain of titillation in the larynx or under the breast bone, or of oppression of breathing; it is very seldom the case that a violent cough sets in without any preliminary symptoms, which, after a short lapse of time, is succeeded by a wheezing and labored inspiration taking turns with the single paroxysms without admitting of a full respiration, for the reason that all the respiratory muscles and particularly the glottis are affected by the spasm. While the exertion to cough is constantly increasing and the spasm of the glottis is gradually abating, the children finally succeed in raising or vomiting up a more or less considerable quantity of a tenacious, white mucus, which terminates the attack. During the attack the children express great anguish and restlessness; in consequence of the impeded breathing, the face and tongue become blue-red, the eyes weep, a watery mucus is discharged from the nose, even blood is spit up sometimes and flows from the nose to the terror of the parents. The vomiting either brings up mere mucus or the contents of the stomach. Involuntary discharge of stool and urine is a rare occurrence if the children are otherwise robust. After the termination of the paroxysm the children continue for some time in a state of confusion and languor, after which they play again as if nothing had happened. Only in the case of feeble or very small children the paroxysms are succeeded by real attacks of eclampsia, or else by a state of sopor or even complete catalepsy. Under such circumstances the intermissions are not free from morbid symptoms, whereas vigorous children seem perfectly sound between the paroxysms.

These paroxysms sometimes set in quite frequently, and at other times at more protracted intervals. Generally their frequency increases up to a certain point where the affection remains stationary for sometime, after which it gradually decreases in violence. In the space of twenty-four hours the children may have upwards of thirty paroxysms of cough; they occur more frequently in the night, and at this time likewise last longer and are more intense. A paroxysm lasts seldom longer than three minutes; if the parents assert that the paroxysms last longer, they are deceived by the anxiety which the mother particularly experiences, to whom a minute may possibly seem a quarter of an hour. The paroxysm is excited by talking, eating, screaming, or by violent exercise, likewise by a violent fit of passion; the cough may likewise occur without any apparent cause, for instance, during sleep.

The constitutional state of the little patients is variously affected by the cough, even if there are no complications. Strong children bear this

cough for months, without losing flesh, or without their general well-being being interfered with. It may, however, be accepted as a rule that if whooping-cough lasts longer than four weeks, children begin to lose their strength and flesh, and that this loss goes on increasingly in proportion as the cough lasts longer. Sickly and very small children are speedily and threateningly affected by the cough, even if none of the foregoing complications are present. The children grow pale and languid, they lose their appetite, but are not often attacked with diarrhœa.

The course of the disease is generally for several months; but when we come to speak of the treatment, we shall show that this period is considerably abbreviated in homœopathic hands.

Of particular importance are the complications and sequelæ of whooping-cough, which alone constitute the dangerous features of this disease.

The most frequent of these complications are inflammatory affections of the lungs. The catarrh of the respiratory passages, which was inconsiderable at first, invades the more delicate ramifications of the air-passages more and more until a more or less intense bronchitis sets in, which easily assumes the capillary form, and becomes readily associated with pneumonia. The presence of such a pneumonia is suspected if the bronchitis steadily increases in intensity, and the intervals between the paroxysms are no longer free from hacking cough and a constantly increasing shortness of breath,—but the signs of this untoward change do not set in until the cough has lasted for days, and even weeks. In such a case, the little patient does not entirely recover from the attacks, he grows languid and feverish, has a short and dry cough, he does not wish to rise from bed, the pulse is hurried, the respiration becomes more and more incomplete, more hurried; he feels drowsy and tosses about. If these symptoms manifest themselves in the later course of the disease, they always augur danger, and very commonly lead to a fatal termination.

Brain diseases are scarcely ever caused by the direct action of whooping cough; existing diseases of this kind may become fatally aggravated by the cough. The convulsions which often attack little children during the course of whooping-cough, are more correctly attributed to the influence of whooping-cough over the whole nervous system, and, on this account, may become lasting. The apparently violent congestions of the head during the paroxysms are of very little importance to the brain of a perfectly healthy child, but they prognosticate trouble, if the brain was diseased before the cough set in.

Acute heart disease is seldom one of the complications of whooping-cough. On the other hand, the development of consumptive pulmonary affections is a very common thing. Usually, however, these affections existed before the cough set in, although many cases occur where the cough occasions the disposition of the tubercular matter in individuals predisposed to this disease.

Beside the complications, the frequently occurring sequelæ may prove very dangerous to the patients. Among them we distinguish chronic bronchial catarrh, deterioration of single parts of the lungs, with consequent malformation of the thorax, pulmonary consumption, heart-disease, although the last-named rarely, and then involving mostly the right side of

the heart; spasms, occasionally mental derangement, and lastly hernia, which is of comparatively frequent occurrence. If the disease lasts a long time, complete marasmus is not an unfrequent occurrence; it is not attended with other morbid conditions, and seems to result from the exhausted condition of the nervous system caused by the excessive paroxysms of cough.

The prognosis is always uncertain. Although the cough does not endanger the lives of healthy children, nevertheless, the supervention of one of the above mentioned complications at any period during the course of the disease may occasion death, or a life-long infirmity; thus it happens that we often see vigorous and healthy children come out of an attack of epidemic whooping-cough like wretched invalids.

### ALLOPATHIC TREATMENT.

In the treatment of Whooping-cough, it is to be borne in mind that the most careful attention to the hygienic management of the case, will save from the complications which constitute the chief danger from the disease. But with this attention, many cases require no further treatment. The clothing should be warm, and flannel should be worn next to the skin at all seasons except summer. The child must be kept indoors during wet weather. The food should be plain and digestible, but nutritious.

In the beginning of the disease, the treatment should be the same as that given for an essential catarrh in the same situation. The same directions are appropriate for the continuing catarrh.

Of the remedies especially appropriate in this disease, is Belladonna. It is markedly serviceable in the spasmodic stage, and if there is much bronchial secretion, but can be given at any time. The rule I have followed is the one given by Trousseau, viz: to begin with a single dose at night, much smaller than will probably be required the next night, two doses were given the third night, three and so on regularly increasing in arithmetical progression until the cough and spasm is markedly relieved (or excessive dryness of the throat, and dilatation of the pupils from Belladonna, become so severe as to be impossible to continue). The dose which is found to relieve the cough should be given each night for a week. Then the dose may be lessened in the same manner as it was increased back to the first dose, but if the cough increases, the size of the dose is to be increased. The medicine should be given about a week after the spasmodic cough has ceased. Trousseau began by giving to young children a pill of one tenth of a grain of Extract of Belladonna, or one fifth of a grain for a child four years old, increased as above directed. As Atropine is the only form which is of uniform strength, it is doubtless the best form for this use.

Take of Sulphate of Atropine one fifth of a grain dissolved in an ounce of Distilled water. The dose is two to four drops taken at bedtime, and gradually increase the dose as is here directed. The Tincture is a suitable preparation, beginning with three drops for a child of two years. The Mono Bromide of Camphor, the Bromide of Ammonium probably rank next in value. Of the Mono Bromated Camphor may be given in doses of three to five grains in Syrup of Tolu, and Mucilage four times a day.

Three to ten grains of the Bromide of Ammonium, or Potassium may be given in Syrup of Tolu and Mucilage three or four times a day.

When the Bromides are given, a dose of Chloral five to ten grains in

Syrup and water at night will generally give a prolonged, and quiet sleep. The two may be prescribed in one mixture. Take of Bromide of Amonium two drams, Chloral Hydrate half a dram, Syrup of Tolu half an ounce, water an ounce and a half. Mix and give a teaspoonful four times a day. In case spasm of the glottis occurs (upper opening of windpipe), the mixture may be given every half hour.

It is claimed that the local effect upon the throat, of a solution of Quinine in water acidulated (with Hydrochloric Acid) sufficiently to effect a complete solution. It is used by inhalations of the solution in spray or atomizing, and taken internally in the usual full doses, one to five grains, given every three or four hours. The writer has seen the disease yield with wonderful rapidity to this treatment in conjunction with the Belladonna treatment. The inhalation of steam will often be beneficial. The vapor of Carbolate of Iodine (Tinct. Iodine, four drams Iodide of Potassium fifteen drams, Carbolic Acid a dram), or Bromium inhaled by dropping upon hot water is often beneficial in severe cases. The medicated steam may be conducted to the mouth by an inverted glass funnel or one made out of stiff paper.

The inhalation of Oliphant Gas (burning gas) has proved beneficial. In case of excessive long-continued bronchial secretion the above inhalations will prove of value. The inhalation recommended for chronic bronchitis may also be used.

Some of the other internal remedies deserve mention as proving serviceable in domestic practice and in the hands of physicians. Carbonate of Potash (Saleratus) of one or two grains three times a day to a child a year old. It may be given with Cochineal as follows: Take of Carbonate of Potash half a dram, Cochineal ten grains, White Sugar two drams, soft water four ounces. Mix.

*Dose:* One or two teaspoonsful three times a day.

Alum is often serviceable in doses of one to six grains according to age. Take of Alum a dram, Syrup of Ginger, Syrup of Acacia, and soft water each an ounce. Mix.

*Dose:* One or two teaspoonsful three times a day or oftener.

Sulphur is often useful in doses of from two to five grains in milk or molasses two or three times a day.

Lung Fever (Pneumonia) is the most dangerous complication. Its management requires especial care. Stimulant applications to the chest, a thin poultice of sixteen parts flaxseed and one part fine mustard covered with an oiled muslin jacket should be used, or the chest wrapped in flannel thoroughly wet with a saturated solution of Camphor Gum in Olive Oil. Anodyne and tonic remedies will be required as in pneumonia occurring under other circumstances. Especial attention should be given to the latter, and to supporting the system with nourishment.

Spasms will be best met by warm baths and the Bromide and Chloral mixture before given.

## HOMŒOPATHIC TREATMENT.

### FIRST OR FEBRILE STAGE.

In the ineipient, fevery, irritative, or catarrhal stage of the cough, the most appropriate remedies are to be found amongst those which we have



already pointed out in the treatment of common Cough, and must be selected according to the indications there given and administered in the same manner, unless otherwise specified. By a careful selection of these remedies, it is frequently possible to check the disorder in the first stage. The following, however, according to the special indications mentioned, are particularly appropriate.

**ACONITUM** is appropriate in many instances for initiatory treatment, inasmuch as there is generally a considerable degree of fever present. As soon, however, as the febrile symptoms have somewhat subsided under the employment of **ACONITE**, which in the generality of cases will occur within a few hours after the first dose or two, and appropriate selection should be made from amongst the following medicines. It should not be omitted, that **Aconite** will frequently be required from time to time, as an intermediary remedy, whenever marked febrile or inflammatory symptoms are present, always returning to such other medicines as are most prominently indicated, as soon as the symptoms which especially indicate **Aconite** have been moderated.

*Dose:* Six pills in a teaspoonful of water, repeated, when requisite, at intervals of three hours.

**PULSATILLA** is appropriate when the symptoms are as follow: cough loose, and accompanied with a flow of tears, weakness of the eyes, sneezing, thick, discolored discharge from the nostrils, slight hoarseness, and inclination to vomit after coughing; occasional diarrhoea, especially at night.

*Dose:* Six pills as for **Aconite**.

**MERCURIUS** is indicated by hoarseness, watery discharge from the nose, with soreness of the nostrils; dry fatiguing cough, generally occurring in two successive fits.

*Dose:* Four pills in a teaspoonful of water, immediately after the fits of coughing (but not more frequently than every hour.)

**BELLADONNA** is one of the most important remedies in the catarrhal stage of whooping-cough, when there is dry, hollow, or harsh and barking nocturnal cough which becomes materially aggravated at night. This medicine is also particularly well adapted to the sore throat, which is not an unfrequent concomitant, at the commencement of the affection.

*Dose:* Three pills as for **Mercurius**.

**NUX-VOMICA** is of great service when the cough approaches the second stage. It is indicated by the following symptoms: dry, fatiguing cough, attended with vomiting, and occurring particularly from about midnight until morning;—the paroxysms so protracted and violent as to produce apparent danger of suffocation, with blueness of the face, and, occasionally, bleeding from the mouth and nose.

*Dose:* As for **Mercurius**.

**IPECACUANHA** is, like **Nux-vomica**, of great value when the cough is attended with danger of suffocation, and each inspiration appears to excite a fresh fit of coughing. It is further indicated when the fits are attended with spasmodic stiffness of the body and blueness of the face, great anxiety and accumulation of phlegm in the chest.

*Dose:* Of a solution of ten pills to three tablespoonsful of water, give a teaspoonful every three hours.

## SECOND OR CONVULSIVE STAGE.

DROSERÁ is one of the principal remedies in the treatment of the disease, when it has reached this stage; and in cases where the constitution has not been enfeebled by the transmission of hereditary weakness or other causes, it will speedily declare its beneficial effects, and materially shorten this trying and painful period of the disorder. The particular indications for the use of this medicine are: violent paroxysms of cough, occurring in such rapid succession, as to threaten suffocation, and attended with the characteristic shrill sound during inspiration, and sometimes fever; after each fit of coughing, vomiting of food, or of stringy mucus; relief on moving about; no fever; or, if there be fever, it consists of regular paroxysms of chilliness and heat; thirst after the cold fit; warm perspiration, sometimes only at night.

*Dose:* Of a solution of eight pills to two tablepoonsful of water. give a teaspoonful after every *severe* fit of coughing.

VERATRUM-ALBUM is indicated when the child has become *reduced* in strength and *emaciated*; or when it suffers from *cold sweats*, particularly on the forehead, with *excessive thirst*, *involuntary emission of urine*, *vomiting*, and other symptoms common to this stage; also pain in the chest and towards the groin; low fever, with small, weak, and accelerated pulse; much thirst; aversion to conversation.

*Dose:* As for Drosera.

CARBO-VEGETABILIS (Charcoal) is frequently useful in bringing this stage of the affection to an early and successful termination, after the previous use of Veratrum or Drosera, or both of these important remedies particularly when, notwithstanding the decrease of cough, the tendency to vomit still remains.

CUPRUM-ACETICUM.—This remedy is found most useful in the nervous stage, *particularly when convulsions with loss of consciousness ensue after each paroxysm*. Also when we find vomiting after the attacks, rattling of mucus in the chest, and wheezing at all times. In almost all cases a marked benefit has followed the employment of this remedy; sometimes it has been found sufficient of itself to cut short the disease, and, in others, has so far modified it, that other remedies, which had before seemed to fail, have, after its exhibition, acted with the most marked effect and completed the cure.

*Dose:* Of a solution of twelve pills to three tablepoonsful of water give a teaspoonful every half hour.

## PNEUMONIA.

## INFLAMMATION OF THE LUNGS.

On account of its frequency and the importance of the affected organ, Pneumonia is one of the most important diseases. Pneumonia may occur at any age, but attacks more especially individuals between the ages of twenty and forty years, very rarely children in the first years of infancy. No constitution is exempt from the liability to an attack; if a robust and

plethoric constitution is generally regarded as more susceptible, it is, most probably, because robust men are more frequently exposed to the exciting causes of pneumonia. This circumstance is most likely the reason why men are so much more frequently attacked than women; the occupations pursued by men expose them more fully and more frequently than women to the deleterious influences productive of pneumonia. Infants at the breast, and children who have not yet passed through the first period of dentition, are seldom attacked with croupous pneumonia. The nature of the country does not seem to exert any palpable influence; for pneumonias occur in a level country as well as on mountains, in sunny districts as well as in exposed places. The seasons, on the contrary, exert a decided influence. Our statistical tables show to a demonstration that the transition from cold to warm seasons is the most fruitful source of pneumonia; the transition from warm to cold seasons is less productive of this disease, winter still less and summer least of any. Mechanical injuries, more especially a violent blow or kick, may likewise give rise to pneumonia; noxious agents acting directly upon the lungs, such as irritating gases, excessive cold or heat, may likewise excite the disease.

**SYMPTOMS.** As yet we are not acquainted with any disease which, in the absence of any particular complications, runs its course in such fixed and stable forms as pneumonia, and adheres as fixedly as this disease to definite critical days.

Pneumonia begins almost without an exception with a chill which is usually very severe and is in many respects of great importance. It is from this chill that we date the commencement of the disease and by it we determine the critical days. The chill which is sometimes of very long duration and is immediately succeeded by, but never alternates with fever, is in no other disease of such a peculiar nature. As soon as the chill sets in, the muscular strength vanishes so that the patient finds it almost impossible to stand erect.

As soon as the chill, which almost always lasts several hours, and scarcely ever only a few minutes, is over, a violent, dry fever-heat sets in, and the pulse becomes more or less accelerated, fuller and more tense, but very seldom exceeds the number of 100 beats. The temperature is always raised a few degrees. The face, which, during the chill, has an almost cadaverous appearance, now becomes flushed, sometimes only on one side; the cheeks are bright-red, the eyes injected, and very commonly some headache is felt, and the patient generally feels thirsty, but is very seldom disposed to vomit. The appetite is at once gone, and owing to the intense fever, all the secretions are suspended. The patient feels more exhausted than he really is. This condition which is as yet free from all local symptoms, may last longer than twenty-four hours, but in such a case the local symptoms appear at an earlier period; in rare cases they precede the chill. The patient complains of unceasing stitching pains which he generally points out with tolerable accuracy as existing at the affected spot, very seldom far removed from it; they are aggravated by every unusual exertion of the respiratory organs, especially by coughing and they sometimes increase to a high degree of intensity. The pain usually sets in associated with a short and at first dry cough, the respiratory movements are much less full and more frequent in number. The

breathing is not only painful and accelerated on this account, but the violent fever likewise occasions an increased desire for breath which cannot be gratified, and causes great restlessness and anxiety and a marked activity of all the other respiratory movements. These exertions are generally so striking that pneumonia can be recognized from this very fact, more especially from the flapping of the *alæ nasi* during an inspiration. Vocalization is of course altered, feebler and shorter, and frequently interrupted.

Soon after the cough has begun to set in, the patient begins to expectorate; this expectoration is important as a diagnostic sign. It is scanty, very tenacious, and usually intimately mixed with blood from the commencement, which imparts to it the color of rust, or brick-dust; this color is scarcely ever absent in the case of young, robust individuals. At this stage the physical symptoms have so far advanced that they render the diagnosis perfectly certain. During the first days the fever gradually increases, showing but slight morning remissions. Considering the high degree of temperature, the pulse is not so very frequent, scarcely ever exceeding 120 beats; gradually the fullness of the pulse decreases considerably.

The end of the inflammatory stage generally designates the period when a change takes place in the symptoms. The infiltration is seldom completed on the third day, sometimes not till the seventh, even still later. After this, the pains almost cease, the breathing becomes more tranquil, the fever is apparently less, the pulse remains unchanged, the constitutional symptoms do not mend very perceptibly. The local as well as the general symptoms may remain unchanged in intensity, until a change takes place in the disease. Such a change seldom takes place before the fifth day. This critical change is very often preceded by the breaking out of *hepes labialis* (cold blisters) which almost always authorizes the expectation of a favorable turn. Previous to the critical change, the intensity of the symptoms either rises to a great height by a gradual increase, or else it is often the case that after two to four quiet days a violent fever again rages for twelve to eighteen hours, after which the disease decreases very suddenly. Convalescence takes place so rapidly that on the fourteenth day every trace of the disease has generally disappeared. As we shall see presently, the mode of treatment exerts a great influence in this respect.

Pneumonia does not alter the shape of the *thorax*, or so little that no stress need be laid upon this symptom; nor are the intercostal spaces altered any more than the general capacity of the *thorax*. Very commonly, however, a more distinct vibration of the thoracic wall, corresponding to the diseased portion of the lungs, is perceived when the patient is talking. The most important positive signs are yielded by percussion which informs us with tolerable certainty whether a larger portion of the lungs is infiltrated or not. We speak, of course, of croupous pneumonia, for it is this alone that causes the infiltration of a considerable portion of the lungs, most commonly of a whole lobe. In the incipient stage of pneumonia, the sound either remains unchanged, or is only changed very slightly; hence, immediately after the occurrence of the chill, no changes can be discovered. But in proportion as the hyper-



œmia increases, the percussion-sound becomes more tympanitic, sometimes to such an extent that one might be led to believe, a piece of intestine had been struck. Hence the tympanitic sound is really characteristic in pneumonia, and is only less marked, if the thoracic walls are very thick, or if the diseased portion of the lungs is separated from the thoracic wall by a normal layer of pulmonary parenchyma. In croupous pneumonia, this is very seldom the case. The more complete the infiltration, the more completely the air escapes from the lungs, and the more empty the sound becomes unless a layer, from which the air has not yet escaped, lies over the diseased portion of lungs. On the sides of this normal layer the dullness often first changes to the tympanitic and further on to the normal sound, the tympanitic sound is sometimes heard even in the non-affected portion of the lungs, most likely owing to the accompanying hyperæmia. A change in the infiltration is revealed by percussion if resolution takes place, in which case the tympanitic sound most commonly returns for a short time, and soon after gives way to the full sound. The results of auscultation are equally valuable as diagnostic signs. At the commencement of pneumonia, the normal respiratory murmur is very often quite feeble, much less frequently increased. As soon as the infiltration begins to set in, and the air is still able to circulate in the inflamed portion of the lungs, we perceive, especially during an expiration, the crepitation that is so rarely absent that it can almost be regarded as characteristic in pneumonia.

In the case of children, the invasion of the disease is often marked by convulsions, such as may occur in other acute affections; in the case of adults, spasmodic symptoms are seldom witnessed. A very severe intestinal catarrh sometimes constitutes the stage of invasion. In such a case the vomiting only lasts until the infiltration is completed, whereas the diarrhœa often continues throughout the whole course of the disease. In the case of children, as well as of old people, very seldom in the case of adults, pneumonia throughout its whole course is sometimes accompanied by such prominent cerebral symptoms that a physical exploration alone is capable of establishing the diagnosis upon a perfectly reliable basis, for even the cough in such cases is often wanting.

The patients sometimes remain unconscious during the whole course of the disease, which need not run a prolonged course on this account. Cerebral derangements of a lighter grade, a light delirium, mostly of a merry nature, sleeplessness or sopor, are very common occurrences. These happen most frequently in the case of drunkards. The tongue does not exhibit any regularly-occurring changes;—at times it is quite clean,—sometimes very much coated, at times humid, at other times quite dry. The last-mentioned appearance is not very promising, it is especially ominous if the balance of the symptoms impart to the affection a dubious character. The appearance of a slight icterus (jaundice) after the completion of the infiltration is very common, nor is it of any particular importance; but if icterus sets in together with symptoms of catarrh of the stomach and bowels, it always indicates an unwelcome complication which threatens to delay the course of the disease. As a rule the skin remains pretty dry during the whole course of the disease; profuse or exhausting sweats occur much less frequently.

The symptoms specially appertaining to the lungs, vary considerably. The cough, which is usually not very violent and occurs in single short turns, may assume a spasmodic character when, on account of the increase of pain, it becomes a source of great distress to the patient. It rarely is entirely wanting, or is quite dry. It is particularly old people who sometimes do not cough at all. The frequency of the respirations is sometimes but inconsiderably increased, and it is the insufficient depth of the inspirations that reveals the character of the disease. The pain varies more than any other symptom; in the case of old people it is generally very slight; in their case the admixture of blood in the sputa is generally missing.

In the case of young and vigorous individuals the resolution of the infiltration generally takes the place very rapidly, sometimes in a single day. Thus we find that the fever decreases on the ninth day, and that the patient generally feels a little better; but there is no sudden decrease of all the abnormal phenomena, no immediate, but a scarcely perceptible, dragging commencement of convalescence. We seldom notice this condition of things in the case of robust men; it occurs quite easily among weakly persons and after an exhausting method of treatment. Sometimes, after convalescence has begun, an exacerbation with progressing infiltration sets in, in which case the fever is very apt to assume an asthenic character and the appearance of typhus, yet the course of the disease need not necessarily be very much protracted or unfavorable. But almost without an exception, important complications exist in such cases; such a form of pneumonia is very seldom the result of epidemic influences, but most generally of an exhausting treatment.

Experience has shown that the seat of pneumonia is of great importance as regards the probability of a normal termination. As a rule pneumonia of the right side is much more favorable than that of the left, pneumonia of a lower lobe lighter than that of an upper one, which is apt not to terminate in resolution and to assume a tubercular form. Inflammations of the left upper lobe are especially obstinate and deviating from the normal course; they occur the least frequently.

#### ALLOPATHIC TREATMENT.

In the beginning of a case of Pneumonia, a saline purge, as one or two teaspoonsful of Epsom Salts, (boiled for a couple of minutes with one-third its bulk of roasted coffee in an earthen dish, and allowed to draw a few minutes to disguise the taste,) the same quantity of Citrate of Magnesia, or Rochelle Salts, or a couple Seidlitz Powders, and its operation followed by a full dose of Opium in some form as the quarter grain sugar coated pills of Morphine, the grain pills of Opium or Cordia, ten grains of Dover's Powder, or twenty-five or thirty drops of Laudanum: the opiate continued at such intervals as will relieve the pain, restlessness or vigilance of the patient, with hot fomentations, hot poultices, or hot Turpentine stupes applied to the chest, will meet the requirements of the case.

The patient should be kept in a warm room of 65° to 70° F.

The air should be moistened with steam.

There is no better treatment for the control of deep seated inflammations than the use of Opium in the doses above indicated. The writer

has frequently seen a marked decline in the frequency of the pulse and breathings (respirations) with comfort and refreshing sleep follow the use of full doses of Opium, not only in the early stage of the disease; but to accompany its continued use to the extent of relieving pain or restlessness throughout the course of the disease. The writer very seldom sees the need of any further sedative treatment. This treatment has the advantage of not being harmful. It in no way delays resolution. If the patient does not expectorate thoroughly, and mucus accumulates in the bronchial tubes, opium ought not be given in full doses. Doses about half the size of those named above, are appropriate under such circumstances.

From the beginning, to the end of the disease, great benefit will be derived from hot fomentation. The hot, wet pack is one of the most serviceable. A large towel, wrung out of hot water, is folded and laid on the affected side: the whole chest is then wrapped in a large towel or bandage. The covering should be thick, to retain the heat. Previous to applying the hot pack, it is doubtless, advantageous to apply a hot Turpentine stupe. A flannel is wrung out of hot water, dipped in hot turpentine, applied to the chest, and thickly covered to retain the heat. When considerable smarting has been produced, the stupe may be replaced by a hot, wet pack, or a hot poultice. Lay hot poultices, covering the affected side and front part of the chest, or the whole chest. They should be frequently repeated. Linseed meal is the best substance from which to make a poultice. The stupe may be used twice a day. In case a poultice is used, sufficient mustard may be mixed with the flaxseed meal, (one or two ounces to the pound,) to make the poultice sufficiently irritating, without the use of the stupes.

The amount of blood drawn to the surface from the internal organs, by these hot dressings, is simply immense. One of the best, and most easily managed dressings for the chest is a flannel jacket, covered with an oiled muslin one. This is the dressing used in Bellevue Hospital, N. Y. This protects against cold, and secures all the benefits of a poultice. The repeated application of the Tincture of Iodine, is an effectual application. Blisters are harmful in the first stage, and after the fever subsides, when absorption has begun, they have no advantage over the application of the Tincture of Iodine.

If the fever and pulse continue to run high, either the Tincture of Aconite or Veratrum Viride may be given, according to the following directions:

Many physicians place great esteem upon the use of Veratrum Viride in the treatment of pneumonia. This opinion was extravagantly expressed by the gentleman with whom the writer first read medicine, Dr. A. K. Fifield, of Canneaut, Ohio: "Veratrum Viride is the sheet anchor in the treatment of pneumonia." There is no doubt of its power to so reduce the force of the current of blood that in the early (beginning) stage of the disease, in strong subjects in full health, and so lessening the amount of blood circulating in the lung, that important service may be rendered. But as soon as the lobe of the lung affected becomes solidified its usefulness must cease. It is too powerful a remedy to be given without the guidance of a physician. The dose of the Fluid Extract is one to three drops, and of the Tincture (U. S. P.) is from two to six drops. If

used, the dose should be small at first, and frequently repeated, one to two hours apart. The dose can be increased until the rapidity of the pulse and highth of fever are materially lessened.

The Tincture of Aconite is serviceable in the same way and is preferred by many practitioners. It is more especially useful in the incipency of the disease, but can be continued with greater advantage until the fever ceases to rise when the remedy is omitted. It may be given in doses of a half drop to a drop, every half hour, until an impression is made on the fever movement, and then continued in doses of a drop every hour or two. This in itself is very effectual treatment. Some physicians are so confident in its efficacy as to assert that no other treatment is required up to the period of crisis, but other measures of treatment are not incompatible with it.

There is no doubt, in some cases of very strong, vigorous patients, when the constitutional symptoms are very violent, of the benefit of bleeding, if practiced during the stage of congestion; this is within the first twenty-four hours, generally. Many circumstances prevent its practice then, as a rule. Only the most robust can be benefited even then. After the disease is fairly established in any case, bleeding can only weaken. All the sedative and revulsive effect required, can be secured by the cathartic, Opium and hot applications, with, perhaps, the use of Aconite, or *Veratrum Viride*.

The use of Mercury or Tartar Emetic, according to the plan of some, is not called for, as they have no special influence over the disease.

One of the principal objects in treatment, after exudation has taken place, is to support the strength of the patient, by means of nourishment, tonic remedies, and stimulants. The majority of cases which prove fatal do so from failure of the powers of life before resolution can take place. It is, therefore, important that supporting measures should not be delayed beyond the time when it is evident that the patient has pneumonia.

In patients who are feeble to begin with, this supporting treatment is all the more necessary early in the disease. It is just as important to support the strength of the patient in this disease as it is with continued fever or any other disease. In warm climates, this part of the treatment is even more important than in cold or temperate climates, as in them patients are less able to sustain the disease. Animal essences (consisting of the juice of finely-chopped lean meat extracted by heating in a loosely-corked bottle set in a kettle of water), strong beef tea (made by taking a pound of finely-minced lean beef in a pint of cold water, gradually raised to a temperature of 160° and maintained at that point for four hours, when it is to be strained and seasoned for use. During the steeping, a little water can be added from time to time to supply the loss by evaporation). Milk, egg beaten with a teaspoonful of sugar and mixed with a little water, or milk, and starchy articles of food, as bread, rice, gruel, etc., will form a suitable variety. The taste of the patient can be, generally, followed with safety. Tender beefsteak, broiled rare, is not inadmissible in many instances; tender fowl and game may often be allowed. Nourishment should be given four times in the twenty-four hours in all cases. The patient ought to have nourishment in the night, and, if very ill, it should be given from two to four hours apart, night and day.



Of tonic remedies, Quinine is to be preferred. It is not needed in mild cases, but should be given in doses of one to three grains three or four times in the twenty-four hours, when prostration of the vital powers is likely to occur. It may be given throughout the course of the disease. In cases occurring with intermittent fever, Quinine should be given in large doses, as directed for intermittent or remittent fever, until the periodical paroxysms are arrested. The high fever is not an objection to its immediate use. In malarious localities, it is possible to prevent the development of these malarial complications by the use of tonic doses of Quinine.

Alcoholic stimulants are often a necessary of the supporting treatment of this disease as an aid to digestion. Two or three teaspoonsful of Brandy or Whisky, may be given with the milk, beef tea or essence, or gruel, every time it is given. Their use should be resorted to whenever any degree of prostration occurs, or insufficient nourishment is taken.

The late Prof. Hughes Bennett, of Edinburg, directed the use of stimulants, as soon as the pulse became soft, to the amount of from four to eight ounces of wine a day. Out of one hundred and twenty-nine cases treated in the Royal Infirmary, of Edinburg, treated by Prof. Bennett, one hundred and twenty-five recovered, and of these, eighty-five took wine or spirits in quantities varying from three ounces upward to, in one case, twelve ounces. Sometimes very large quantities of spirits are required. After convalescence is well established, their use should be discontinued.

In chronic pneumonia, tonics of Quinine and Iron, as three grains of the Citrate in syrup, three times a day. Cream or Cod Liver Oil may be required. Anodynes should be given to palliate the cough and distress. The cough mixture of Paregoric, Hyoseyamus and Wild Cherry Bark, directed in the treatment of acute bronchitis, is often sufficient, but stronger preparations may be used if necessary. Counter-irritation, by applying Tincture of Iodine over the affected side, is useful. Suppurating measures comprise all that can be done to prolong life.

In the treatment of pneumonia in young children, the same principles prevail as are given for adults. A teaspoonful of Rochelle Salts, or Citrate of Magnesia, should be given to move the bowels. They should be kept open by the occasional use of the same remedy.

For the relief of pain, cough and restlessness, Opium should be given in just sufficient amount to relieve these symptoms. The most eligible are : Paregoric, Laudanum, particularly the Deodorized Laudanum and Dover's Powders, in doses suitable to the age. Under six months, five to ten drops of Paregoric; half a drop to a drop of Laudanum; one-fourth to half a grain of Dover's Powder, given from two to four times in the twenty-four hours. Over the age of six months, up to two years, these doses may be doubled. A somewhat larger dose may be given to a child of three or four, and for one five or six years old, the dose may be three times as large as for six months. The opiate is often more serviceable if Tincture of Hyoseyamus in doses the same as of Paregoric or Tincture of Belladonna in the same doses as of Laudanum, is given with it.

In older children, with excessive fever and a bounding pulse, the

Tincture of Aconite may be given in doses of half a drop to a drop two or three hours apart. Its continued use will depend on the amount of impression on the fever and pulse. It should not be continued after the fever is down or the pulse down to one hundred per minute, or if given in only half the former doses. Then if the fever rises again it can be given more frequently. The following is a suitable mixture: Take of Tincture of Aconite Root sixteen drops, Syrup of Ipecac two drams, Syrup of Tolu to make four ounces. Mix. Half a teaspoonful can be given every two or three hours, to a child five years old.

From one to three grains of Citrate of Potash may be given about four hours apart, in syrup or in other mixtures, to stimulate the kidneys and skin. Spirits Mendivesus in doses of half a teaspoonful to a teaspoonful and a half, given in the same way, is suitable for the same purpose.

The supporting treatment should be the same as for adults and should be begun early. Strict attention to nourishment should be given from the beginning, from two to four hours apart. The dose of Quinine for a tonic is from half a grain to a grain. The dose of Brandy or Whisky, given in the food, is from half a teaspoonful to a teaspoonful every two or three hours. Infants at the breast will be sufficiently nourished by the breast. With them the stimulant should be given in sweetened water.

The same plan of counter-irritation as with adults should be followed—giving preference to a thin poultice made of flaxseed meal, with one-sixteenth part of mustard, kept constantly on the chest, covered with a jacket of oiled muslin. Flannel wet with Olive Oil, containing as much Camphor as it will dissolve, wrapped about the chest and covered with oiled muslin, is a convenient and suitable application. The Oil can be made more irritating, if it does not redden the skin, by the addition of a little Turpentine.

Turpentine, Tincture of Iodine, or Mustard poultices, may be used if preferred, but the chest should be covered by oiled muslin whatever plan of counter-irritation is followed.

COMPLICATED CASES. SYMPTOMS. In severe cases, inflammation of the lungs is often found combined with pleurisy, in which case the pains of the chest are intense, and mostly of an acute, shooting character. Another and still more frequent complication is formed with bronchitis.

ISSUE AND RESULTS. When the disease comes rapidly to a favorable *termination*, some striking evacuation generally attends it, such as a very free and abundant expectoration of thick, white or yellow matter, often slightly streaked with blood; or a profuse and general sweat; diarrhœa; a profuse discharge of urine, with a copious sediment; or a flow of blood from the nose.

If inflammation of the lungs be not checked in the earlier stages, the lung is altered in structure; and the face becomes patched with red, and sometimes livid, the vessels of the neck swollen and turgid, and the pulse weak and irregular.

In the advanced or suppurative stage of the disorder, the expectoration becomes purulent or converted into a brown, serous fluid, and slight shiv-

erings generally supervene; the pain or sense of fullness and tightness becomes abated, and the patient is commonly enabled to lie on the affected side without much inconvenience; but the pulse becomes weak and thready, and the strength commonly sinks rapidly: a fatal result is, however, sometimes, even then, avoided by proper homœopathic treatment.

#### HOMŒOPATHIC TREATMENT.

The great danger attendant upon this disease renders the assistance of professional experience, when that can be obtained, absolutely indispensable. But to provide, in some measure, for the contingencies in which such aid cannot be secured, the following directions are subjoined, to enable even unprofessional persons to entertain some hope of insuring a successful issue.

**ACONITE.** In the stage of simple inflammatory congestion, with severe inflammatory fever, whether or not accompanied or followed by violent shooting pains in the chest, this remedy is unquestionably of great service.

*Dose:* If *singly*, of a solution of six globules to two tablesoonsful of water, give a teaspoonful every hour, until the pulse becomes reduced in volume and frequency, or the skin moist, or covered with profuse perspiration,—upon which the intervals may be extended to two hours, and the administration thus continued.

**BRYONIA** is frequently the best remedy to follow *Aconite*, when the more severe febrile symptoms have been lowered by the medicine, or, more especially, when such symptoms as the following predominate: cough with expectoration of stringy or tenacious phlegm of a brick-dust color, oppression and acute shooting pains in the chest; or rheumatic pains in the chest and extremities, with aggravation on movement; foul, dry, tongue, constipation, and other indications of derangement of the stomach. When the pain in the chest is excessive, and of a shooting, cutting, or pricking character, the membrane which invests the lungs is generally involved, and the case thereby complicated with pleurisy. In such cases the alternate use of *Bryonia*, with such other medicine as may further embrace some of the symptoms, is sometimes necessary, or, at all events, conducive to more speedy recovery.

*Dose:* In every respect as directed for *Aconitum*.

**BELLADONNA** is, generally required before (or even after) *Bryonia*, when the fever returns after having been apparently subdued by *Aconitum*, and the difficulty of breathing, and pain, or feeling of uneasiness in the chest, continue; the expectoration tinged with blood, and difficult to bring up; the cheeks flushed, lips and tongue dry and parched, the skin hot, and the thirst incessant; the pulse hard, quick, and full; the sleep disturbed by frightful dreams and delirium. In young, robust subject, *Aconitum* and *Belladonna* may be exhibited in rapid alternation, with the most satisfactory results during the first stage.

In such cases, indeed, the further progress of the disease is not unfrequently arrested, or at all events, such a degree of improvement is effected that any remaining symptoms, such as some degree of oppression, and expectoration of viscid phlegm, readily yield to the administration of *Bryonia*.

*Dose:* As for *Aconite*.

**PHOSPHORUS.** This remedy has been employed with striking success in almost every stage of the disease in question, under whatever form it presented itself, and even when the disease had already attained a somewhat advanced stage. Much fever, with hard, full pulse, cough, and blood-stained expectoration, are the salient general indications for *Phosphorus*. It is also more or less necessary in all cases occurring in consumptive habits.

*Dose:* If *singly*, of a solution of six pills to two table-spoonsful of water, give a teaspoonful every three hours.

#### ADDITIONAL PARTICULARS.—SERIOUS CASES.

**ANTIMONIUM-TARTARICUM** is frequently of service when the oppression at the chest and anxiety continue to increase, and the pulse becomes small, weak, and irregular; or, moreover, either when there is *no* expectoration, or when the expectoration is *not* tinged with blood, and occurs chiefly at night; or, again, when difficulty of breathing, anxiety, and other dependent symptoms are always temporarily relieved after expectorating.

*Dose:* Of a solution of six pills to two table-spoonsful of water, give a teaspoonful, first at intervals of a quarter of an hour, and then of half an hour, and so on, extending the intervals to three hours, as improvement gradually ensues. When the urgent symptoms have subsided, consider the general aspect of the symptoms, and suspend or continue treatment accordingly.

**SULPHUR** is a medicine of great service when a relapse threatens to succeed the improvement previously effected by other treatment; and in repeated courses, upon the accession of convalescence, to restore the vigor and equilibrium of the system, and to neutralize the remaining susceptibility to affections of the same organs.

*Dose:* If against an *impending relapse*, three pills in a teaspoonful of water every three hours, until the progressive improvement, previously manifested, becomes apparent. If as an *after-remedy*, against the remaining susceptibility of the lungs, give six pills in a table-spoonful of water, every morning, the first thing (*fasting*) for a week.



## ASTHMA.

A disease characterized by an extreme difficulty of respiration (breathing) which is worse at certain seasons of the year and particular periods of the day, being generally worse at night. The difficulty of breathing is increased by violent emotions, damp atmosphere, excess of any kind, strong exercise, running, walking briskly, or ascending a flight of stairs. It is also more laborious in a horizontal position, and hence more distress is felt at night when in bed. The warmth of the bed also has a strong influence on the disease, by assisting in the causes that fill up the air-passages, and hence causing paroxysms to be more frequent during the night than the day.



The patient seeks relief by sitting upright in bed, or bending the body forward and endeavoring to expand the chest mechanically by every possible means. Old persons are more liable to the disease than young.

It is now believed that spasmodic asthma is caused by a spasm of the muscular fibres encircling the bronchial tubes, especially the small branches. The existence of these fibres is placed beyond a doubt by microscopic examinations. In common Asthma the lining membrane of the air passages is more or less affected, as in chronic bronchitis, but the affection of the mucous membrane extends further down into the lungs, the air cells are more obstructed, and the conformation of the chest itself is often somewhat contracted and defective. The action of the diaphragm is imperfect, as well as that of the walls of the chest, and hence it is that from want of enervation and free action in these parts, the disease is commonly deemed nervous, as distinguished from chronic bronchitis which affects the bronchial mucous membrane chiefly. In Spasmodic Asthma the nerves are still more deeply implicated; their action seems defective in the respiratory organs, as stammering shows imperfect nervous action in the organs of speech; and in both cases the difficulty is increased by physical or moral excitement. Chronic Asthma seldom shortens life where patients carefully avoid all violent emotions, exercise, and excess, although spasmodic paroxysms may endanger life at any time, if these precautions are neglected. Attacks of Spasmodic Asthma generally occur during the first sleep, soon after midnight when sleep is most sound, or early in the morning.

The patient suddenly awakes with a sense of suffocation, tightness of the chest and difficulty of breathing; the respiration is wheezing and laborious, the shoulders are raised and every effort made to enlarge the chest. The pulse is usually quick, weak, and irregular, the lower extremities cold. When cough and *expectoration* come on or can be brought on the patient is relieved. The spasm may continue half an hour or more and even three or four hours. Asthma is often complicated with diseases of the heart, or with chronic bronchitis, acting as a source of permanent congestion, predisposing the parts to be more easily thrown into a state of spasm.

The most common consequences or concomitants of the disease are chronic inflammation and dilation of the broncha. Emphysema (a swelling produced by air or gas) oedema (tumefaction) of the lungs, spitting of blood, tubercular deposits, larger girth and widening of the cavities of the heart, collection of liquid into the sack containing the heart, into the pleura, and sometimes congestions and effusions in the head causing apoplexy.

#### ALLOPATHIC TREATMENT.

For the relief from a paroxysm of Asthma a great variety of remedies have been tried by the patient and frequently he knows what will succeed most promptly, so that often his experience is the best guide.

The narcotics which are best adapted for immediate relief are Morphine and Belladonna. A hypodermic injection of a quarter to a third of

a grain of Morphine (always by a physician) is one of the surest known means for cutting short a paroxysm.

Atropine may be injected in doses of a sixtieth of a grain and is probably the next best method for procuring relief.

These two remedies may be combined with advantage. A slower and unsatisfactory way is to give these remedies by the mouth. A third to half a grain of Morphine and twenty to thirty drops of the Tincture of Belladonna are the doses.

Inhalations resorted to are Stramonium, Belladonna, Tobacco, Opium, Nitrate of Potash (Saltpetre), Arsenic and anæsthetics. Stramonium or Belladonna leaves are smoked from a common pipe with benefit, or dipped in a strong solution of Saltpetre and dried, they may be burned in a close room and the fumes breathed until relief is obtained. Cigarettes made by the following formula (of Trousseau) are excellent, the patient smoking them when the paroxysm occurs and breathing the fumes until relief follows: Take of Belladonna five grains, Stramonium and Hyoscyamus each three grains, Extract of Opium one-third of a grain, Cherry-Laurel Water a sufficient quantity to moisten the leaves. Moisten the leaves of Belladonna Stramonium and Hyoscyamus in the Cherry-Laurel Water, having dissolved in it the Extract of Opium, dry and make into a cigarette. Two to four of these cigarettes may be smoked during the day. To persons who do not smoke the smoking of one or two cigars will frequently bring relief.

The following formula is a tried and useful one, and has been long and successfully employed in the Pennsylvania Hospital. Paper prepared as follows and rolled into cigarettes can be smoked two or three times a day until relief is afforded or giddiness follows: (It is called Compound Arsenical Paper.) Take of Belladonna leaves ninety-six grains, Hyoscyamus and Stramonium leaves each forty-eight grains, Extract of Opium four grains, Tobacco eighty grains, Water a pint. Mix, and make a solution; then add Nitrate of Potash (Saltpetre) one hundred and forty grains, Arsenite of Potash three hundred and twenty grains. Saturate white, thin, blotting paper with this solution and when dry it is ready for use. It can then be rolled into cigarettes and smoked. Either Chloroform and Nitrite of Amyl given by inhalation, by a physician, will frequently arrest a paroxysm.

Burning nitre paper in the room and allowing the patient to inhale the fumes, is frequently successful in arresting the paroxysm or producing relief. The paper is made by dipping white blotting paper in a saturated solution of Saltpetre and drying.

Certain remedies which produce nausea will arrest a paroxysm. One of the best of these is Lobelia, one or two teaspoonsful of the Tincture may be given every half hour until nausea is produced. Other Emetics may be used; in this way the sickness of the stomach relaxes the spasm and the patient breathes freely.

Anti-spasmodics, such as Assafoetida, Skunk Cabbage, and Skull Cap, will sometimes relieve the spasm causing the difficult breathing. Bromide of Potassium in doses of fifteen or twenty grains with half as much

Iodide of Potassium, given every half hour or hour, will sometimes cut the attack short.

In the interval between the attacks, attention should be given to the general health by the use of tonics, as may be required, regular habits of life, the regular use of sponge or shower bath, regulating the diet to overcome dyspepsia, relieving constipation. When digestion is poor, one or two teaspoonsful doses of Liquid Pepsin, prepared by Sheffer's formula, taken at meal times, will be beneficial. Sometimes five or ten drops of Dilute Hydrochloric Acid, may be added to each dose, with benefit.

Nearly all cases of Asthma depend upon a co-existing bronchitis, and upon the cure of that depends the cure of the Asthma. The most effectual measure to produce this is a change of climate, (even changing the sleeping apartment from one room to another has been known to accomplish it). The most popular climate now for asthmatic patients to resort to is that of the Rocky Mountains—especially Colorado. This climate proves beneficial in a large number of instances.

Commencing to change the residence, a locality chosen should in the first place be one which possessed just the opposite characters as the former one, as from the city to country, or from country to the city. If the patient lived in a moist air, a locality with a dry one should be first tried—and *vica versa*; from a low region to a high one, or the opposite, etc. Sufficient has been said to guide in the selection of a change of residence. If the patient does not improve under the treatment resorted to, a change of climate should be insisted on.

A remedy which proves successful in a large number of instances is Iodide of Potassium. It should be continued for a long time, in doses of five, ten, fifteen or twenty grains, three times a day. The smallest dose should be commenced with. It can be given with tonic remedies, should they be needed. This is one of the remedies which is sometimes given to relieve an attack of asthma. For this purpose, it should be given in doses of fifteen, twenty or thirty grains, every two, three or four hours, according to the severity of the seizure. It is one of the most reliable remedies. In the so-called "hay asthma," or summer catarrh, the Iodide of Potassium, combined with Arsenic, gives good results: Take of Iodide of Potassium an ounce, Fowler's Solution a dram, water four ounces. Mix, and give a teaspoonful every four hours.

When Arsenical Cigarettes are not smoked, Arsenic may be given in doses of one to three drops, after eating. The two remedies, Iodide of Potassium and Arsenic, have accomplished the greatest number of cures.

For the relief of bronchitis, the various means recommended for bronchitis may be resorted to.

### HOMEOPATHIC TREATMENT.

The treatment has to aim at the relief of the present paroxysm and at the curing of the disease. When the attack is accompanied by congestion of the head in fleshy individuals, and in women and children of a peevish, ill-natured tendency, where the attack usually occurs in the evening, sensation of dust in the lungs, better when binding the head

back and when holding the breath. Face and eyes red, head hot, sleepiness—but cannot sleep, Belladonna will prove itself a good remedy.

If the attack was brought on by mental excitement: Aconite. If children are troubled with asthmatic breathing while teething, and at the same time are very peevish, nothing pleasing them, want to be carried all the time: Cham.

If the breathing is anxious, short and oppressed, with much labor and *greatly* increased difficulty on ascending a flight of stairs, attacks of suffocation especially at night or in the evening in bed attended with great *restlessness* and *fear of death*, extreme thirst, drinking often but a little at a time; cannot lie for fear of suffocation and wants to be in a warm room, you will find Arsenicum the best remedy.

IPECAC for Spasmodic Asthma with *violent contractions in the throat and chest*. Rattling noise in the bronchial tubes during an inspiration. Suffocation threatens from contraction in the throat and chest, worse from the least motion. Nausea with a feeling of emptiness about the stomach.

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### SINGULTUS, HICCUP.

This is owing to a spasmodic contraction of the diaphragm, during which the air is drawn in through the contracted glottis with a shrill and short sound.

The hiccup either originates in the nervous centers, as during a generally increased irritability or Neuralgia, especially in the case of hysteric and hypochondriac patients; or when accompanying cerebral (brain) diseases, such as cerebral anæmia consequent upon long-lasting, exhausting diseases, or upon considerable losses of blood and other animal fluids, as well as upon violent psychical (mental) impressions, such as fright, anger, etc.

Or else, it is simply a reflex-phenomenon, as during diseases of the pleura and pericardium.

Consensual singultus may occur during diseases of the stomach, liver, pharynx, intestinal canal, etc.

In the case of children it often occurs in consequence of a cold, or acid stomach.

Singultus occurring during cerebral anæmia (bloodlessness of the brain) consequent upon chronic diseases, such as cancer, Bright's disease, tuberculosis (consumption,) etc., or upon exhausting diseases, such as typhus, cholera, or upon pleuritis with profuse exudation; likewise upon exhausting diarrhoea, is always a very dangerous symptom that may continue for days, and finally increase to convulsions.

### HOMŒOPATHIC TREATMENT.

A passing hiccup is scarcely ever noticed; only if it lasts too long and becomes too severe, medical treatment may have to be resorted to.

In cases of simple hiccup it may be arrested by stopping the breathing for some time, or by drinking a little cold water, by fixing one's attention



upon a certain object, such as: holding a key in one's hand, by a systematic crossing of the fingers of both hands; by a sudden surprise, or such domestic remedies as eating a little sugar, magnesia, ice, etc.

Infants who have taken cold, have to be warmed, after which they should be put to the breast; if their stomachs are acid, we give them *Calcar* 6, or *Nux. vom.* 6; if they are affected with intestinal catarrh, we give them *Chamomilla* 3, or *Rheum* 3. A domestic remedy that is frequently made use of, is *calcined Magnesia*, as much as will cover the point of a knife morning and evening. In one case, where not one of these remedies would help, a teaspoonful of recently prepared lime-water removed the spasm.

As external remedies practitioners recommend: laying grated horse-radish upon the epigastrium, dropping ether upon the pit of the stomach, painting this region with the oil of chloroform, one drachm to two drachms of almond-oil, and in desperate cases the inhalation of ether or chloroform.

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## CHAPTER XXII.

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### DISEASES OF THE PLEURA.

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#### PLEURITIS, PLEURISY.

##### INFLAMMATION OF THE PLEURA.

Inflammatory affections of the pleura are not by any means rare occurrences; yea, the frequent adhesions of the lungs to the thorax revealed by post-mortem examinations, show that pleuritic affections are not only very frequent, but that they run their course unobserved. The more trifling inflammatory phenomena are without any practical value, nor do they ever constitute an object of treatment; for this reason we here treat only of the more acute forms of pleurisy with copious exudation.

Pleurisies of this character are scarcely ever really primary diseases; in the majority of cases they are of a secondary nature. The history of primary pleuritis is somewhat obscure, unless the disease is caused by some direct and mechanically acting agency. A most frequent cause is said to be a violent cold; but the case is here, as in pneumonia, the connection is taken for granted rather than proven. The more frequent occurrence of pleuritis, during peculiar states of the weather, justifies the conclusion that atmospheric conditions exert a decided influence upon the origin of this disease. To designate such inflammations as rheumatic is in so far justifiable to some extent, at least, as acute rheumatisms occur epidemically at the same time.

On the other hand, pleuritis as a complication or secondary affection,

is exceedingly frequent. All inflammatory pulmonary affections, even hyperæmia of more than ordinary extent, if occurring near the surface of the lungs, develop pleuritis which is generally confined to a very limited space, but may likewise be very extensive and violent. Inflammatory affections of the heart may lead to pleuritis. Acute rheumatism and peritonitis, and likewise acute exanthemata, easily result in the development of pleuritis. Among chronic affections, the following may occasion the disease: Pulmonary consumption, pulmonary abscess, suppuration of the vertebra and ribs, Bright's disease. The occurrence of pleuritis during the stage of convalescence in severe acute affections, in pyæmia and generally in diseases characterized by marked signs of a septic condition of the blood, is a remarkable fact which does not admit of any further explanation. Like peritonitis, so pleuritis is superinduced in its worst and most extensive form by the intrusion of foreign substances into the pleural cavity, most commonly by the effusion of pus from a superficial cavern, or from a suppurating bone.

**SYMPTOMS.** It is absolutely impossible to draw a permanently and universally true picture of pleuritis; the symptoms characterizing an attack of pleuritis, vary greatly in intensity as well as extent; many symptoms are sometimes entirely wanting, whereas in other cases they are most prominently present. However, inasmuch as the symptomatic differences of pleuritis are mostly depending upon the quality of the exudation, we subjoin a superficial sketch of these differences and shall discuss essential details in subsequent paragraphs.

The plastic exudation exists seldom as an idiopathic affection; it generally accompanies other diseases, more particularly pneumonia. Inasmuch, however, as it is scarcely ever, even when existing as an idiopathic disease, accompanied by violent fever, we may suppose, that even where it exists as a complication, it does not contribute much to an increase of the fever. On the other hand it is precisely this form that causes the most violent pain which is very much increased by every somewhat more expansive movement of the thorax and of the body generally, more particularly by coughing, and which very frequently renders even percussion painful. After the lapse of at most a week the pain disappears again entirely; but the physical signs, of which we shall treat by and by, sometimes remain for some time after.

Like all other more extensive inflammatory processes, it almost always sets in with a severe chill followed by considerable increase of the pulse and temperature, attended with headache, intense thirst, loss of appetite, and almost immediately an intense pain in the inflamed region of the pleura. The pain generally decreases in proportion as the effusion increases in quantity. As the exudation increases the breathing of course becomes shorter, and a distressing cough sometimes sets in, with a thin expectoration which is tinged with blood, but is not to be regarded as a sign that pneumonia or bronchitis has supervened, but most commonly depends upon no other cause than the congestion of the non-affected part, which congestion is a necessary consequence of the pressure caused by the exudation, and for this reason does not show itself at the outset of the disease, but only in its subsequent course. In favorable cases the termination in recovery may commence with the second week, and may lead to a

complete restoration of health; or else, the process of reabsorption takes place very slowly, imperfectly, and the patients remain for a long time in a sickly, lentescent condition, where they are threatened with renewed attacks and exacerbations.

The third form, empyema, often develops itself, as was stated above, from the second form. That pus is forming, may be inferred from the circumstance that the fever does not abate; on the contrary, that in the subsequent course of the disease, and without any increase of the exudation, the fever increases in violence, mingled with chills, or assuming the character of an hectic fever, with a constantly increasing prostration of strength. If the purulent exudation is a consequence of pyæmia, of a septic state or a general dissolution of the blood, the exudation may originate and run its course without pain; it only aggravates the previously exciting morbid phenomena. The course of the disease depends essentially upon the fact whether the exudation is re-absorbed or enclosed within a sack, or finally, whether it escapes from the cavity, and in what direction.

The fourth form, where the exudation is chiefly serous, usually imparts to pleuritis a sub-acute or even chronic character. This form is very insidious, because it so often develops itself very gradually and without pain, and even commences without fever which does not generally supervene until at a later period. At first the patients only complain of lassitude, they lose their appetite, have a sickly appearance. Gradually the respiration becomes more oppressed and labored, but not by any means to a degree that might lead the patients to suspect the presence of a pulmonary disease. The quantity of the exudation occasions a displacement of the thoracic and abdominal organs. Recovery from such attacks always takes place slowly; it is only exceptionally that absorption takes place very rapidly amid a profuse flow of urine.

Among the symptoms of pleuritis there is not one that could be pointed out as characteristic of the disease. It is true that in most cases of acute pleuritis we have the peculiar pain, but it varies exceedingly in character and intensity. At times the pain is simply a sensation of tenseness and constriction; at other times the pain is a seated, localized stitching pain; at other times again the pain is spread over the whole side of the thorax, and is of a tearing or burning kind. Not unfrequently there is no pain at all; this happens more particularly in most insidious cases. In genuine pleurisy there is very seldom any cough, especially at the commencement of the disease; if cough sets in at a later period, it may be occasioned by simple hyperæmia, or by pneumonic infiltration. At all events it causes the patient a good deal of distress, increases his pain to an extraordinary degree and complicates the course of the disease, since every additional obstacle must necessarily, in view of the existing shortness of breath, imply an additional amount of danger. The symptoms presented by other organs cannot be determined beforehand. Most generally it is the action of the heart, especially that of the right heart, which is altered; if any considerable amount of exudation is present, the beats of the heart become irregular, stronger and more rapid, the more so the more the heart is pushed out of its place by the effused fluid. A displacement of the liver is attended with pressure in the right side, and slight symptoms of jaundice. Neither the intestinal canal nor the kid-

neys are involved in all cases. The brain becomes slightly engorged, if the effusion is copious and the circulation is interfered with. The position of the patients deserves particular notice, more especially as contrasted with their position in pneumonia. Pleuritic patients almost always lie on the painless and unaffected side, whereas, if the effusion is not attended with pain, they prefer lying on the diseased side. Very seldom the patient wants to lie on his back; if he does, the trunk has to be elevated a good deal.

All these objective as well as subjective symptoms, which we have described, are not sufficient to establish a reliable diagnosis. If a reliable diagnosis is at all possible, it will have to be based upon the results of a physical exploration, which is even more important in this disease than in pneumonia, for the reason that pleurisy often remains such a latent disease that the objective phenomena alone can shed light upon its existence and true character. This examination can only be made by a physician.

#### ALLOPATHIC TREATMENT.

The indications for treatment, in the first place, are to subdue the inflammation and to relieve the pain. For this purpose, full doses of Opium is the most useful and effective treatment, which not only relieves the pain completely, but lessens the congestion very materially.

The hypodermic injection of Morphine in doses sufficient to produce its sedative influence, a third to half a grain, by the physician, is the best method for its administration. If given by the mouth, from a grain and a half to two grains of Opium, thirty to forty drops of Laudanum, fifteen or twenty grains of Dover's Powder, may be given every two hours, until the pain is relieved, and repeated at intervals sufficiently often to relieve the pain. After the pain is relieved, doses half the size above named will probably be sufficient, but the pain must be relieved.

Morphine may be given, by the mouth, in doses of a third to half a grain, and repeated every hour until the pain is relieved, after which the dose should not exceed a fourth of a grain, repeated often enough to relieve the pain.

For continued use, if the preparations of Opium produce unpleasant symptoms, probably Atropine in doses of one-sixtieth of a grain, given with the Opium, will obviate the difficulty; or Codia may be used instead of Opium or Morphine in the same doses as that of Opium.

A full dose of Quinine (fifteen or twenty grains) at the very beginning, is said to suppress the inflammation. It is more effectual if Opium be given with it as above directed.

The cold wet pack, applied to the side, diminishes the inflammation and relieves the pain. A large towel is wrung out of *cold* water, folded and placed over the affected side. Then wrap the chest tightly with a long, broad bandage, or towel, which was previously had in readiness and fastened.

Oftentimes the hot wet pack is more servicable and is to be preferred, the feelings of the patient being a safe and reliable guide. It is applied



in the same way, the towel being wrung out of water as hot as can be borne.

Hot linseed-meal poultices applied to the affected side, will answer the same purpose.

Some physicians prefer a large mustard plaster over the affected side; or Turpentine steepes, in the method described in the treatment of Pneumonia. The application of Tincture of Iodine may be made to the affected side, and is a serviceable form of counter-irritation.

A large blister, over the affected side, is always applied by some good practitioners, but they do not seem to possess any advantage over the use of heat either by the pack or poultices, and appear to be harmful by adding to the irritation from which the nervous and circulatory systems are suffering. When the disease has begun to decline, a blister is useful, by assisting in the removal of the products of inflammation, but then has no advantage over the repeated applications of Tincture of Iodine.

Like pneumonia, in cases of robust persons with high fever and a strong, incompressible pulse, and the pain is very severe, a blood-letting, in the very beginning of the disease, will prove serviceable and often be followed by quick relief. The amount of blood taken should be from twelve to sixteen ounces. A feeble, or only moderately strong person, ought not to be bled.

After the pain has been relieved for several hours by the use of Opium, the revulsive effect of a free saline cathartic is required. For this purpose, one or two tablespoonsful of Epsom Salts is the most efficient. If boiled with one-third its bulk of roasted coffee for a couple of minutes, in an earthen vessel, and then allowed to draw for a few minutes, the taste will be covered. Other salines may be given, but with less effect, as the Solution of the Citrate of Magnesia, Rochelle Salts or Seidlitz Powders. The bowels should be kept open by the use of moderate doses of the saline cathartics. For this purpose the latter ones are as appropriate. If the fever and pulse continue to run high, after the influence of the Opium is produced, a drop of the Tincture of Aconite should be given every half hour until an impression is made on the fever movement and then continued in one-drop doses of one hour to two hours apart, according to the degree of fever and the force of the pulse. The opium should be continued in doses of sufficient size and with such frequency as would relieve the pain.

The use of *Veratrum Viride* is preferred by some practitioners as a sedative for the pulse and fever. While it is very powerful it seems to the writer that the Aconite is to be preferred. Neither of them should be prescribed except by a physician, and then they are only called for, as a rule, in persons of robust constitution. In giving *Veratrum Viride*, the Fluid Extract should be used in doses of one to three drops, or the Tincture, in doses of two to six drops, repeated every hour until the pulse is slowed and then repeated two hours apart to continue the required impression upon the pulse.

This treatment should continue as long as there is pain and fever, and should be maintained just in proportion to the prominence of these

symptoms, but should be discontinued when they disappear. Counter-irritation will be appropriate, as will be shown.

Great reliance is placed upon the use of Mercury by some practitioners, as having a specific effect upon this and other inflammations of serous membrane and by these is generally given with the opium in doses of from one-half to one grain. The writer believes it is powerless in the way claimed. The use of the remedy as a cathartic, in doses of ten grains, is admissible, if the patient is not especially susceptible to the influence of the drug. If the bowels do not move it should be followed by a Seidlitz Powder, or one of the other saline cathartics mentioned above.

The nutrition of the patient should be maintained by allowing such food, from the very beginning of the disease, in patients not strong, as will be retained and is digestible; as a rule milk, eggs, animal essences or strong beef tea, and bread, rice, and other farinaceous articles are to be chiefly used, but in the latter part of the disease the food should be more solid and meat may be allowed. In a very robust patient feeding is not required to be followed as persistently until a few days have elapsed, but with feeble patients the best results depend upon immediate and systematic feeding. The principles for nourishment given on the treatment of Pneumonia will apply here with only little less force.

Measures to promote the absorption of the liquid thrown out into the pleural cavity are hydrogogue cathartics (producing watery stools), diuretics (medicines increasing the flow of urine), counter-irritation and such remedies as may especially promote absorption.

It is generally not well to resort to these cathartics until late in the disease, on account of their extreme depressing influence. The most powerful should be given only when the greatest urgency exists, as extreme difficulty of breathing, from the great amount of liquid in the pleural cavity, or where other means have proved unavailing. They are Elaterium, Croton Oil, and Gamboge. They ought, if used, to be prescribed by a physician. The dose of Elaterium is one-eighth to one-fourth of a grain; it should be combined with half a grain or a grain of Extract of Hyoscyamus. The dose of Croton Oil is one drop in mucilage or syrup. The dose of Gamboge is three to five grains in pill form, or rubbed up with sugar.

Cathartics which are less severe, and very effective and can be relied on are the Saline Cathartics mentioned before in the Diuretics; may be given without reducing the system, and they act often with efficiency. Mustard Whey is resorted to as a domestic remedy, and is often sufficient. It may be taken almost at will. Water Melon or Pumpkin seed tea can be given with the addition of fifteen or twenty grain doses of the Citrate Bitartrate or Acitrate of Potash. Squill, Digitalis and Broom are the most efficient remedies for this purpose. They may be combined in an Infusion of Digitalis (made from one dram of Digitalis to a half pint of water), four ounces, Vinegar of Squill half an ounce, Fluid Extract of Broom half an ounce. Mix, and give a tablespoonful three times a day or oftener. The Potash Salts just mentioned may also be given with this mixture, or the Iodine of Potassium in doses of twenty grains.

When giving cathartics or diuretics for removing the dropsy, the amount of drink should be limited as much as possible. Blisters no doubt hasten the absorption of the fluid, but it is probable that as much good will be done by the repeated applications of Tincture of Iodine to the side.

If the strength of the patient should begin to fail, cathartics and diuretics are out of place, especially the former, and Tonics and stimulants should be given as directed for Pneumonia.

If the liquid accumulates in the chest to such a degree as to endanger life, the surgeon should remove it by tapping as will be described for Chronic Pleurisy and Dropsy of the Chest.

The treatment of chronic pleurisy calls for the same treatment as the latter stage of acute pleurisy, consisting of the same cathartics and diuretics, and for the same purpose. Small blisters may be repeatedly applied over the side, or preferably the Tincture of Iodine may be applied from time to time.

The strength of the system requires support by the use of Tonics, nourishment, and in extreme cases Alcoholic stimulants and out of door exercise. In many cases supporting measures are the chief means of cure. The Citrate of Iron and Quinine is as good a tonic as any, given in doses of three to five grains three times a day. It should be given in solution. The diet should be of the most nutritious possible, but simple and digestible. If Alcoholic stimulants are used at all it should be a glass of wine or tablespoonful of whisky or brandy at meal times, and is doing good if the patient eats and digests more food.

If the fluid persists in the chest it can be effectually removed by tapping by means of a small trocar and canula attached to a Davidson's syringe. The liquid is removed in the same way as it is drawn from a vessel, during the process of an injection when the fluid returns after its removal a half ounce of the Compound Solution of Iodine (Iodine a dram, Iodine of Potassium two drams, water twenty-one drams), should be injected into the plural sac. This is especially serviceable if the sac contains pus. Then the sac may be washed out with an ounce of this solution to a pint of water.

The use of Iodine of Potassium in doses of ten to twenty grains three times a day for a long time is useful in promoting absorption. The treatment of dropsy of the chest is the same as that for chronic pleurisy.

The principles of treatment for pleurisy in young children are essentially the same as for the disease in the adult. The doses of Opium admissible are proportionately much smaller than are directed for an adult. It cannot, with safety be used so heroically. For a child six months old or less, five to ten drops of Paregoric, and half a drop to a drop of Laudanum. Above this age and under two years, ten to twenty drops of Paregoric, two or three drops of Laudanum, or a grain of Dover's Powder; at the age of three or four, twenty to thirty drops of Paregoric, three to five drops of Laudanum or two grains of Dover's Powder, may be given. The effect should be watched with a great deal of care. The doses should be repeated only sufficiently often to relieve pain, which will vary in frequency from two hours apart to two or three times a day. When the opiate is given every two hours until positive drowsiness is produced, it should be given at longer intervals.

Hot applications, poultices or the hot wet pack, are the preferable means for local treatment.

Hot Turpentine stupes, or the application of the Tincture of Iodine, or Mustard plaster, may be resorted to. These are fully described in the treatment of pneumonia of the adult.

After the pain is relieved, the bowels ought to be moved by the use of a saline purgative, as directed for adults, in doses of half a teaspoonful to a teaspoonful; or Castor Oil may be given in doses an eighth to a fourth the size, mixed with an equal quantity of Glycerine, and a drop or two of Oil of Gauletina or Cinnamon, to disguise the taste. The bowels should be kept soluble by full or half doses of the same cathartics.

If the pulse and fever continue high, after the pain is relieved and the warm applications to the side have been made, if the patient is over three years old, the Tincture of Aconite in small doses, frequently repeated, until an impression is made on the fever, and the pulse reduced to ninety or a hundred. It can be given with syrup as follows: Take of Tincture of Aconite half a dram, of Syrup Tolu three and a half drams. Mix. Dose: From one to six drops every one or two hours.

If the disease is secondary, or the patient feeble, Aconite or other depressing measures ought not to be used. Opiates to relieve pain, stimulant and warm applications as above directed, tonics and nourishment, will constitute the treatment.

Except the child takes freely from the breast, nourishment consisting largely of milk, eggs, animal essences, and strong beef tea should be given through the length of the disease.

To promote absorption, the use of Tincture of Iodine for a counter-irritant is preferable. Small blisters made with the Blistering Collodion is admissible.

The diuretic effect of Iodide of Potassium is very useful. It should be given in doses of two to five grains three or four hours apart: Take of Iodide of Potassium two scruples, Syrup of Peppermint and Water each an ounce. Mix. Dose: Twenty drops to a teaspoonful. If the child's blood is much impoverished, a scruple of the Pyro-Phosphate of Iron may be added to the above formula. This prescription is very useful in preventing the disease passing into the chronic state.

Other diuretics may be given in connection with the Iodide of Potassium. The following is a suitable formula: Take of Vinegar of Squills two drams, Tincture of Digitalis thirty drops, Water four ounces. Mix. Dose: A teaspoonful for a child two years old, or a dessertspoonful for a child four or five years old, three or four times a day.

Purgatives should be limited as above stated, to keep the bowels open.

In case the treatment failed to produce the absorption of the fluid the surgical procedures recommended for Chronic Pleurisy of the adult should be resorted to by the physician.

#### HOMŒOPATHIC TREATMENT.

ACONITUM is an indispensable remedy in allaying the intense fever (with quick and full pulse) which is often attendant on Pleurisy; and is in



many cases, indeed, when timely administered, alone sufficient to cure the disease. It completely supplies the place of the lancet in such cases, and rarely fails to effect improvement in from six to eight hours; should it not do so in that space of time, another remedy must be selected.

*Dose:* Of a solution of ten pills to two table-spoonsful of water, give a teaspoonful every hour, until the pulse becomes more healthy, the skin moist, and the breathing less painful and impeded.

BRYONIA-ALBA should, in general cases, follow *Aconitum* when the fever has been somewhat allayed by that remedy. It is more particularly indicated, either in simple or complicated pleurisy, when the following symptoms are encountered, at an early stage of the disease: aching, burning, but more especially *acute shooting or cutting pains* in the chest, much increased *during inspiration or on movement*; *oppression and anxious respiration*; palpitation of the heart; dry, cracked, brown, or *yellow-coated tongue*; *bitter taste, nausea*, and occasionally *vomiting* of mucus, or of a bitter, bilious-looking fluid; aching or painful pressure at the pit of the stomach and under the false ribs; intense thirst, especially at *night*; constipation; head confused and giddy; giddiness on sitting-up in bed; aching and shooting pains in the head, or pain as if the head would burst, particularly at the temples, with exacerbaton on coughing, or moving; firey, or bluish redness, and puffiness of the face; restless, disturbed sleep, frequent startings; nocturnal delirium, with alternations of lethargic sleep; burning heat of skin; occasionally, partial, clammy perspiration; pulse generally frequent, hard, and small, but sometimes full, unequal, intermittent, and weak; aching in the limbs. Lastly, when, in connection with many of the above, the following symptoms are met with: cough on lying on the side, or impossibility of lying otherwise *than on the back*; dry cough, or cough with expectoration of dirty yellow-colored phlegm, streaked or tinted with blood, and attended with great exacerbation of pain,—*Bryonia* will rarely fail to render much service, and can, indeed, with difficulty be dispensed with.

*Dose:* Of a solution of six pills to two table-spoonsful of water, give a teaspoonful every four hours (or in very severe cases every two hours).

SULPHUR may with advantage follow *Bryonia*, when the pain mentioned has been removed by that medicine, and often completes the cure, when *Aconite* or *Bryonia*, or both of these, have been insufficient. This remedy is, however, not uncommonly, of essential service as an *intermediary* resource, administered from time to time, to awaken the susceptibility in the system to the action of others,—in such cases (associated with constitutional taint) as are not adequately influenced by either of the foregoing.

*Dose:* If as an *intermediary* medicine, two globules in a teaspoonful of water, *four* hours after the last dose of any other medicine, followed, in *six* hours, by such treatment as may be particularly indicated. If as a conclusive resource to perfect the cure (already advanced) three globules in a teaspoonful of water, every six hours, until four doses have been given, and then six globules the first thing in the morning (fasting) for four days; then pause two days, resuming the course as before, if necessary, and so on, until all traces of the disease have been removed.

## Part Tenth.

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### DISEASES OF THE ORGANS OF CIRCULATION.

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## CHAPTER XXIII.

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### DISEASES OF THE HEART.

#### INFLAMMATION OF THE HEART.

Under this head, we will have reference to inflammation of the muscular structure of the heart, carditis,—inflammation of the lining membrane of the heart, endocarditis and inflammation of the membranous sac which envelopes the heart, pericarditis. These are generally treated upon as separate and distinct diseases, but as their symptoms are very similar, as well as the treatment recommended for them, we have judged it best to embrace them under one head.

**SYMPTOMS.**—Inflammation of the heart, or its membranes, usually commences with the symptoms common to most inflammatory attacks, as chills, heat and dryness of the skin, thirst, flushed face, full pulse, etc. These are succeeded by rapid, imperfect and often unequal breathing and an acute lancinating pain about the region of the heart, which may extend to the shoulder. This pain, especially in pericarditis, is aggravated by pressure over the heart, as well as by a full inspiration. There will, also, be a dry harrassing cough, which augments the patient's sufferings, and generally a sense of suffocation will be experienced. Motion or exercise will increase the pain and difficulty of breathing to a greater or less extent. The features are haggard and expressive of much suffering, with a degree of anxiety, the heart beats violently and irregularly; a sensation of fainting is present, more or less constantly at first, the pulse is full, hard, and bounding, but speedily becomes small, frequent, and unequal, and frequently cannot be observed at the wrist; the appetite is deficient; the tongue coated white; the bowels constipated; the urine insufficient and high-colored; the skin is often bathed in sweat, as in acute rheumatism; and when the diaphragm or midriff is involved, there will be a distressing and painful hiccup.

**CAUSES.**—These affections are, most commonly, owing to the presence of acute rheumatism, the disease either attacking the heart primarily, or being translated to it from some other part of the system. They may, likewise occur from other causes, and are sometimes met with in combination with pleurisy, Bright's disease of the kidneys, etc.

**PROGNOSIS.**—These attacks are of a very serious character, and may terminate fatally in a very short time; though it is said that even when

left entirely to themselves without any care or treatment not more than one in six cases is wont to prove fatal. The principal evils to fear are the secondary or chronic affections resulting from the acute attack.

#### ALLOPATHIC TREATMENT.

Inflammation of the substance of the heart is so rare and so completely impossible to determine during life, that a discussion of means of treatment is not called for.

The most frequent form of inflammation is that of the lining membrane of the heart (endocardium) and is called endocarditis. It produces the great majority of the diseases of the heart by causing permanent changes in its valves. This form of inflammation of the heart (endocarditis) most frequently occurs with inflammatory rheumatism (of the joints) and appears to depend on the same morbid cause. When rheumatism exists, therefore, treatment required for it will have the most favorable influence on the endocarditis and should be employed. If promptly resorted to they prove protective against this disease.

Remedies addressed directly to this inflammation may be briefly summarized as follows: It is appropriate to use saline laxatives, provided the patient is not weak or reduced. The articles most appropriate are a tablespoonful of Rochelle Salts, and Seidlitz Powders. Pain over the region of the heart should be met by hot poultices, the hot wet pack, as described for pleurisy, or Turpentine stupes. Opium in doses of half a grain to a grain, fifteen to twenty-five drops of Deodorized Laudanum or appropriate doses of other preparations of Opium, may be given to relieve the pain and sufficiently often to procure this effect.

The subsequent ill-effects of the disease are due to the products of the inflammation, either the deposit of Gypse beneath or upon that portion of the membrane covering the valves. Remedies which will reduce the fibres in the blood or retain it in a fluid state, are called for. The alkalies called for by the rheumatism are appropriate. Ammonia has a direct influence to this end; the Aromatic Spirits of Ammonia (Hartshorn) may be given through the course of the disease. The dose is a teaspoon half full to a teaspoonful in water or syrup and may be repeated from two to six hours apart, according to the severity of the disease.

To promote the absorption of the lymph Iodide of Potassium may be given in doses of ten to fifteen grains three times a day and the Tincture of Iodine may be applied, daily or less often, over the region of the heart. The discrimination of this affection requires the skill of a physician.

The more immediately and exceedingly dangerous inflammation to which the appendages of the heart is subject is pericarditis (inflammation of the serous membrane covering the heart.) When the disease occurs in the course of acute Articular Rheumatism the remedies appropriate to that affection are urgently called for. The use of the saline cathartics, Rochelle Salts in doses of one to two tablespoonsful or one or two Seidlitz Powders, are useful by way of revulsion. They should be repeated in four hours, if the bowels have not moved.

Opium in some of its forms is invaluable given to the extent of reliev-

ing pain. The best manner of using it is the hypodermic injection of Morphine in doses of a quarter to a third of a grain by a physician. They may be repeated every half hour until pain is overcome. A third of a grain of Morphine, thirty drops of Laudanum or a grain and a half of Opium may be given every hour until pain is relieved. Afterwards repeated at such longer intervals as will maintain the effect.

If, after the pain is relieved, the pulse continues strong and very rapid Tincture of Aconite may be given in doses of a drop every hour until an impression is made on the fever and pulse and then every two hours to maintain its effect. Tincture of *Veratrum Viride* is used instead by some practitioners for this purpose. The dose is two to five drops of the Tincture, or one to three drops of the Fluid Extract every two hours.

Mercury is thought by some practitioners to exercise a controlling power over this and other inflammations of serous membranes. If used it may be given in doses of a sixth to a third of a grain of Calomel every two hours to impress the system quickly. Its beneficial action is, to say the least, doubtful.

Counter irritation, such as Mustard plasters, Turpentine stupes as directed for pneumonia, the applications of Tincture of Iodine, the hot wet pack may be useful. A warm poultice may be kept over the region of the heart.

After the acute symptoms have subsided to promote the absorption of fluid from the pericordeal (upon the heart) sac, the region over the heart may be painted every day with Tincture of Iodine, and small blisters may be applied by using the Blistering Collodion with a camel's-hair brush. When a blister is made it should be allowed to immediately drop up.

The use of Cathartics is admissible as far as the strength of the patient permits to promote absorption. Epsom Salts, or Citrate of Magnesia, or Bitartrate of Potash may be made to produce one or more water stools a day. Diuretics as Squills and *Digitalis* may be given in equal parts three or four times a day in doses of a teaspoonful.

It is during this stage that the strength of the system needs supporting with nutritious food, as strong beef tea or essence, milk, raw eggs beat up with sugar and water or milk, or poached, and such farinaceous articles as the patient desires; steak broiled rare may be eaten if relished. Quinine in doses of one to three grains three times a day, may be given for a Tonic. If the circulation is weak, stimulants are called for, a tablespoonful of brandy or whisky may then be given in milk or with the raw egg as often as two hours apart, if required. Its beneficial effect will be shown by producing a fuller, softer, and more regular pulse.

During convalescence the diet should be good and nutritious, but simple. Much exercise should be avoided, though part of the time spent in the open air is beneficial. Treatment appropriate to other diseases when pericarditis occurs as a complication must be continued.

Pericarditis from wounds can have little else done for it, except relieve the pain with Opium.

Should the disease become chronic, the treatment given for the acute disease after the early symptoms, are appropriate. Iodine of Potassium may be given in doses of ten to twenty grains three times a day. If



the blood is much impoverished, one or two grains of the Pyrophosphate of Iron may be given with the Iodine of Potassium. In cases in which the use of these means with Cathartics, Diuretics, etc., fail to remove the liquid, it has been successfully done by tapping, and in some instances the Compound Solution of Iodide of Potassium has been injected into the sac.\*

So serious a disease, and one involving such difficulty in its management, requires, invariably, the services of a physician.

### HOMOEOPATHIC TREATMENT.

The diseases of the heart are all so difficult to understand, and a proper understanding of the case is so important that, although I very much desire to bring their treatment within the comprehension of the masses, I am unable, thus far, to do so fully. Appended are many of our most approved remedies with their particular indications, by Lilienthal. The *dose* should be varied and repeated in proportion to the urgency of the case. From four to eight pills in a little water, repeated at intervals of from one to twelve hours, may be given.

**ACONITE.** Oppression about the heart, burning flushes along the back; palpitation, with feeling as if boiling water was poured in the chest; anxiety, difficulty of breathing, flying heat in face, sensation of something rushing into the head; fainting with tingling.

**AMON. CARB.** Audible palpitation, with attacks of great anxiety, as if dying; cold sweat, involuntary flow of tears; unable to speak; loud, difficult breathing and trembling of hand; debility and soreness of the whole body; pulse hard, tense, frequent.

**APIS MEL.** Sudden attack of acute pain just below the heart, soon extending diagonally toward the right chest; blowing sound with the diastole; sensation as if he would not be able to breathe again; great prostration; pulse accelerated, full and strong, or feeble and imperceptible.

**ARGENTUM MET.** Full feeling in region of heart; frequent spasmodic, though painless, twitchings of the whole cardiac muscle, especially on lying on back; fears apoplexy; lame, weakness with all pains.

**ARNICA.** Sensation as if heart were grasped by an iron band; stiches in cardiac region; region of base of the heart feels as if bruised; sudden pain, as if the heart got a shock; intermittent, feeble, hurried, irregular pulse; hypertrophy of heart, induced by over-exertion, especially in young men, as from rowing; the fatty heart.

**ARSENICUM.** Palpitation, after suppressed herpes or footsweat, with feeble irregular pulse; the heart beats strong, visible, and audible at night, more rapidly when lying on back; pericarditis in consequence of suppressed measles, or scarlet fever, with inexpressible anguish and restlessness, worse at night, flushed face, paralytic feeling in the upper extremities; tingling in fingers, cold perspiration.

**ASSAFCETIDA.** Nervous palpitations, with small pulse, breathing not oppressed, in women after suppressed discharges, or bodily exertions; pressure in cardiac region, as if heart were too full and expanded; pulse small.

**AURUM MET.** Frequent attacks of anguish about the heart, with tremulous fearfulness; violent beating of the heart after exertions, with great agony; strong beating of heart, with anxiety and congestion to head, after metorrhagia; when riding or walking palpitation compels one to stop; palpitation with irregular intermittent pulse and short breathing.

**BELLADONNA.** Nervous palpitations, with congestion to head; pressure in cardiac region, which arrests the breathing, and causes a sense of anxiety; gurgling at the heart, a kind of palpitation when going upstairs; throbbing of carotid and temporal arteries.

**BENZOIC ACID.** Benzoate of Ammonia. Rheumatism of heart; pains change place incessantly, but are not constant around the heart; awakens after midnight with violent palpitations of the heart and temporal arteries; internal but no external heat; at times tearing pains in the extremities, relieving the heart; urine high-colored, offensive, hot, scalding, ammoniacal, high specific gravity.

**BRYONIA.** Pericarditis, with stitching pain in cardiac region, preventing motion and even breathing, wants to lie perfectly quiet; heart beats violently and rapidly, strong orgasm of blood; from re-percussion of measles.

**CACTUS GRAND.** Pericarditis and endocarditis; sensation of constriction of the heart, as if an iron band prevented its normal movement; acute pains and stitches in the heart; difficulty of breathing; attacks of suffocation, with fainting; cold perspiration on face, and loss of pulse; palpitation when walking, and at night when lying on left side. Nervous palpitations; easily frightened, often awakes in a fright; numbness of left arm, annoying, creeping sensation from before backwards in cardiac region, œdema of the hands, especially of left one; endocardial murmurs, excessive impulse, increased præcordial dullness; enlarged right ventricle; irregularity of the heart's action, at times frequent, at others slow; great irritation of the cardiac nerves; enlarged left ventricle; pains in the apex of the heart, shooting down the left arm to the ends of the fingers; feeble pulse, dyspnœa; general weakness, prostration, great depression, sleeplessness, fainting.

**CIMICIFUGA.** Excessive impulse of the heart over an extensive portion of the left side, with dullness on percussion; heart's action ceases suddenly, impending suffocation; pains from the region of heart, all over the chest and down left arm, palpitation, unconsciousness, cerebral congestion, dyspnœa, face livid, cold sweat on the hands, numbness of the body, the left arm numb, and as if bound to the side; pulse weak, irregular, trembling; chorea of heart, tumultuous, irregular, unexpected, and strange motions of the heart; cardiac debility; rheumatic endo, and pericarditis.

**COLCHICUM.** Heart disease, following acute rheumatism, dropsy of heart (hydro-pericardium); pressure and anxiety in præcordial region; fullness and oppression, as from stagnation of blood in the heart at night, while lying on left side, he is obliged to turn to the right side; dull, irregular, seemingly suppressed beats of heart, with a peculiar sensation in chest; pulse small, slow, and weak.

**DIGITALIS.** Pericarditis, with copious serous exudation; violent, but

not very rapid beating of the heart, irregular intermittent pulse, brick-dust sediment in urine, during or after rheumatism. Very feeble irregular action of heart, with feeble, small, intermittent pulse; great prostration, fainting on the least movement, even lifting the arms, with palpitations, coldness of limbs and body, and dreadful weak feeling in pit of stomach, with or without convulsions of syncope; profuse expectoration of bloody mucus, and vomiting of food; sensation as if the heart would stop beating if she moved, with fear of impending death; hydropericardium (dropsy of the heart).

**FERRUM.** Consecutive heart disease, especially from chlorosis and onanism; congestion to head, spitting of blood; palpitations, better from moving slowly about; pseudo-plethora, with hard, strong, beating of the heart and throbbing in all bloodvessels; pulse full, hard, increased by exertion; soft bellows sound at apex; nervous restlessness, must walk slowly about.

**GELSEMIUM.** Cardiac neurosis. Feeling as if the heart would stop beating if she did not move about; a sensible motion of the heart, as though it had attempted to beat, which it failed fully to accomplish, and the pulse then each time intermitted, worse when lying down in bed, especially when lying on left side; excessive action of heart; stitching sensation in cardiac region, heart's action slow and feeble, the beats of heart cannot be felt, chills and pains in head; nervous chills, yet skin is warm, wants to be held that she may not shake so.

**IODUM.** Pericarditis in complication with croupous pneumonia purring feeling in the region of the heart, violent palpitation, increased from the slightest motion, better while lying perfectly quiet on the back; fainting spells; sensation as if the heart were squeezed together; fluttering sensation in heart; constant, heavy, oppressive pain in cardiac region.

**LILIUM TIGRIN.** Cardiac irritability, nervous palpitation; pains dull pressing and heavy, as if the heart were grasped and released alternately; sensation as if the heart contained too much blood, which might be relieved by throwing up blood; pain, pressure, and fullness about the heart with a feeling of coldness about the heart, but no indication of any organic lesion; trembling feeling about the apex of the heart, worse on talking; frequent sensation as if the heart stopped, followed by a rush of the blood to the heart and violent palpitations; amelioration by lying on left side.

**LYCOPODIUM.** Hydropericardium; trembling palpitation, pulsating tearing in the region of heart; sensation as if circulation would stand still, or ebullition of blood; palpitation of heart nearly every evening in bed; marked palpitation, with flatulence; acceleration of pulse, with coldness of the face and feet; neck drawn towards right side, stitches in left side of chest; typhoid symptoms.

**NUX MOSCHATA.** Hysteria cordis; violent action of heart; feels as if her head would burst, and her heart be squeezed off; trembling fluttering of heart, as from fright; palpitation and fainting, followed by sleep; irregularity in heart's beat, pulse intermits sometimes so long that it excites fear of death; murmur in carotids; frequent trembling pulse, accelerated after wine; disposition to faint even from slight pains.

**NUX VOMICA.** Hypertrophy of heart from portal obstruction; palpitation in frequent short paroxysms, with pulsating throbs in the direction of the heart, especially from mental emotions, protracted study, after eating highly-seasoned food; tired sensation of heart, with palpitation when lying down, frequent belching; dilation of heart (weakened heart) with nervous palpitation, with nausea, inclination to vomit, and heaviness of the chest.

**PHOSPHORUS.** Disease of right heart, with consequent stagnation; dilation of the heart following endocarditis; fatty degeneration of heart; dyspnœa, tightness across the chest; great weakness, with inability to exert himself; palpitation from every emotion, with rush of blood to the chest, especially in rapidly-growing youths; over-sensitiveness to external impressions; congestion to lungs, tightness across chest, and tight cough; painless diarrhœa.

**PHYTOLACCA.** Chronic rheumatic endocarditis; shocks of pain in cardiac region, pain goes into right arm; awakens with lameness near heart, worse during expiration, cannot get to sleep again; heart's action weak (fatty heart), with constipation; great exhaustion.

**PODOPHYLLUM.** Nervous palpitation, in consequence of excessive hepatic action; sensation in chest as if heart were ascending to throat; palpitation, with a clucking sensation rising up the throat, obstructing respiration; palpitation from mental emotion or exertion, with rumbling in ascending colon; heavy sleep, fatigue on waking in morning.

**PULSATILLA.** Nervous palpitation in young girls during the time of puberty, or from amenorrhœa; catching pain in cardiac region; better for a time from pressure of hand; rheumatic irritation of heart, the pains shifting rapidly from one part of the body to another; constant chilliness; worse nights, especially after getting feet wet; burning in cardiac region; violent fits of palpitation, often with anguish and obscuration of sight.

**RHUS TOX.** Uncomplicated hypertrophy, from violent exercise; organic heart disease, with sticking pain and soreness; numbness and lameness of the left arm; chest and heart feel weak after a walk; violent palpitations when sitting still; pulse sometimes quicker than the heart's beat, irregular; restlessness, must change position; always worse when keeping quiet.

**SCUTELLARIA.** Irregular action of the heart, from derangement of the cardiac nerves; tremulousness and twitching of the cardiac muscles; oppression of the chest, with a sticking pain in cardiac region; sensation of throbbing about the heart, with flushed face; nervous disorders of heart, as palpitation, tremor, and strange sensations, from emotional excitement; hysteria; reflex nervous irritation, from ovarian or uterine disorders.

**SEPIA.** Suppressed menses; congestion of blood to the chest, with violent palpitations; an occasional hard thump of the heart; palpitations, with anxiety about things which happened years ago; palpitation after mental emotion; interruption of the beating of the heart, most after dinner; alarming, quivering motion; restless, fidgety; sensation of ball in inner parts.



**SPIGELIA.** Rheumatic pericarditis. Undulating motion of the heart; indistinct beats of the heart, running one into another; tumultuous beating of the heart in recumbent as well as in sitting positions, not synchronous with the radial pulse; spasms of the chest; suffocative complaints; tremulous sensation in chest and temples, increased by motion; tearing sensation in chest when raising the arms overhead and when touching pit of stomach; purring murmur during the beats of the heart; stitches in cardiac region; pulsation of carotids, with tremulous motion; great dyspnoea at every change of position; bright redness of lips and cheeks, changing to pallor during every motion; audible beating of the heart, causing a pain that is felt through to the back; cutting pains from the heart to shoulders, as far as the head and arms; arthritic pain and stiffness in joints; dull stitches where the beats of heart are felt, and recurring with the measured regularity of the pulse; scraping in throat; affection of the tracheal and bronchial mucuous membranes; systolic blowing at the apex; pulse irregular, strong, but slow.

**SPONGIA.** Aneurisma aortæ; dry paroxysmal cough; worse lying down; rheumatic endocarditis; loud blowing with each heart-beat; attack of oppression and cardiac pain; worse when lying with the head low; stinging-pressing pain in præcordial region; violent palpitation; awakens at night with a sense of suffocation; violent gasping respiration; loud cough; great alarm; agitation and anxiety; valvular insufficiency; feeling of numbness of lower part of the body; trembling in all the limbs.

**VERATRUM ALBUM.** Tumultuous irregular contractions of heart, forerunners of paralysis; intermittent action of heart in feeble persons, with some obstruction to hepatic circulation; violent, visible, anxious palpitation, with fainting; pulse sometimes slower than heart-beat.

**VERATRUM VIRIDE.** Idiopathic and rheumatic peri- and endo-carditis; violent fever; full, hard, bounding pulse; congestion to the head, without delirium; throbbing carotids; constant burning pain, with oppression of the chest; sensation as of a heavy load on the chest; heart's action violent and tumultuous; respiration rapid, labored, and sighing; faintness and blindness when rising from lying, from sudden motions; patient feels best when lying quietly.

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### PALPITATION OF THE HEART.

Palpitation of the Heart is symptomatic of some other disease, but is often so severe as to require a distinct consideration. There is a rapid beating or fluttering motion of the heart which may be felt very plainly when the hand is placed upon the chest over this organ. Various other symptoms may accompany it, as a shortness of respiration, a sense of pain in the neighborhood of the heart, a feeling of constriction across the chest, inability to lie down, pale countenance, swollen feet, a real debility, irregular or intermittent pulse, much distress on slight exertion, etc. The palpitation may vary from a simple, full, uniform, powerful beating of the heart to a rapid, violent, confused and irregular action, shaking the whole system, and producing very disagreeable sensations.

**CAUSES.**—Palpitation of the heart is generally owing to dyspepsia, or some derangement of the digestive functions; occasionally it occurs as a symptom of some nervous disorders and it frequently accompanies enlargement of the heart, dropsy of the heart, and other diseases of this organ and its arteries. It may also be brought on by great mental excitement, intemperance, masturbation, excess in venery, etc.

**TREATMENT.**—When the palpitation is owing to disease of the heart, relief is all that can be expected unless the disease be cured, and the same may be said when it is owing to the dyspepsia or other affections; but diseases of the heart are not so readily cured as many other maladies. Whatever may be the disease occasioning the palpitation, it should be treated and removed, if possible.

#### ALLOPATHIC TREATMENT.

Many cases of palpitation of the heart depend on an impoverished condition of the blood (anæmia), in which case the remedy is to restore the blood to its natural richness by the use of Iron and Quinine, good food and hygiene. The Citrate of Iron and Quinine is one of the suitable remedies given in doses of three to five grains in solution three times a day, other tasteless forms of Iron may be used as the Pyrophosphate, or the Soluble Citrate, and the Quinine may be taken in pills of one or two grains.

Many cases of feeble heart, rapid in its action, are greatly relieved by five to twenty drops of Tincture of *Digitalis* three or four times a day.

If the patient is strong and robust, and the action of the heart vigorous and the arterial high, the physician would be justified in resorting to the use of such arterial sedatives, as Tincture of *Aconite* in doses of two or three drops, or Tincture of *Veratrum-viride* in doses of two to five drops sufficiently often to produce a sedative effect on the action of the heart.

The Bromides are suited to cases of irregular action of the heart, and in cases having an irregular circulation in one extremity, while it is regular in the other, and various other irregular symptoms referable to the circulation. The Bromide of Potassium may be given in doses of ten to thirty grains three or four times a day. For feeble patients the Bromide of Iron in one or two grain doses may be given at the same time, or other Tonics may be taken.

A Belladonna plaster over the region of the heart will sometimes give relief, especially, if there is pain.

Prolonged attacks of palpitation are often speedily relieved by half teaspoonful doses of Chloric Ether, or Hoffman's Anodyne every fifteen or twenty minutes until relief is obtained.

If valvular disease, or dilatation of the heart exist, exercise should be of the most moderate kind, and all excitement of every kind avoided.

This trouble may be caused by tobacco, coffee, tea, stimulants, narcotics, mental depression, or excessive venery. Such causes are to be sought for, and if discovered they are to be removed.

#### HOMCEOPATHIC TREATMENT.

**ACONITUM** may be recommended for palpitation of the heart attended with a sensation of anguish and intense oppression at the chest, and

generally with weight and weariness of the extremities, flushing of heat, especially in the face, short, painful and anxious respiration, or shortness of breath, particularly during sleep; sometimes pricking sensations in the chest, or sensation of compression, or as if bruised in the left side, or, again, shooting pains in the left side, particularly during motion, and on going up stairs; palpitation caused by fright.

*Dose:* Six pills in a teaspoonful of water, repeated at intervals of an hour, until the particularly indicative symptoms are moderated; or afterwards again, from time to time, should those indications occur.

BELLADONNA, when there are violent pulsations of the heart, reverberated, as it were, through the whole chest, and sometimes to the extremities and head; sensation as of a heavy weight on, or firm band about, the chest, with pains in the shoulder-blades; irregular and sometimes interrupted breathing, with an occasional effort to expand the chest for breath, or short, anxious, and very accelerated respiration; palpitation, sometimes attended with intense anxiety, particularly in the evening in bed; tremulous palpitation of the heart, with anguish; or palpitation generally on going up stairs.

*Dose:* Six pills in a teaspoonful of water, as directed for *Aconitum*.

NUX VOMICA is more particularly of service for palpitation of the heart, occurring in persons of dry, meagre habit, but also in persons of robust constitution and sanguine or bilious temperament, and particularly when the paroxysms are liable to come on either in the morning—sometimes attended with nausea, and even inclination to vomit, or with pressure at the chest—or more especially upon first lying down or *after eating (sometimes after every meal)*, heat, or even burning sensation in the chest, occasionally occurring at night, and attended with great anxiety, sleeplessness, and agitation; or if coming on after the use of coffee or liquors.

*Dose:* Six pills, as directed for *Aconitum*.

SULPHUR is generally of service after one or more of the foregoing medicines, in completing the cure, but particularly when the attacks are provoked by ascending stairs, etc., and are accompanied by a feeling of anxiety or dread. This remedy is also very serviceable when the affection has ensued after the suppression of an eruption or the *sudden healing* of an old sore.

*Dose:* Six pills, as directed for *Aconitum*.

ARSENICUM may sometimes be required after the previous administration of Sulphur, in cases in which the symptoms have not yielded to a *second* course of the last-named medicine, and when the affection has ensued as the consequence of a suppressed eruption, or of the *sudden healing* of an old sore.

*Dose:* Six pills, as directed for *Aconitum*.

LACHESIS is indicated when there is frequent desire to draw a long or deep breath, or shortness of breath chiefly prevalent after eating or after any exertion of the limbs (particularly of the *arms*), generally attended with deep despondency; also by suffocative attacks at *night*; or spasmodic affections of the heart, attended with a peculiar pulsative sensation deep

(as if on the drum) in the ear, which make it appear as if the membrane would burst—or again, in very severe cases, and when fainting-fits and cold sweats attend upon spasmodic attacks of the heart, and there is extreme shortness of breath.

*Dose:* Six pills, as directed for *Aconitum*.

PULSATILLA is a remedy of great value in the generality of cases in which palpitation of the heart occurs as a nervous or hysterical symptom, or in young girls during the time of puberty, or from suppressed menstruation.

*Dose:* Six pills, as directed for *Aconitum*.

COCCULUS is more particularly required when there is a suffocative palpitation of the heart associated with weakness, trembling of the limbs and extreme languor, dizziness and faintishness, and when the attacks are aggravated or excited by talking, eating, or drinking.

*Dose:* Six pills as directed for *Aconitum*.

CACTUS is indicated in palpitation occurring in persons who are usually low-spirited or hypochondriacal; palpitation worse when walking, and at night, when lying on the left side; general prostration of strength, and sleeplessness.

*Dose:* Six pills, as directed for *Aconitum*.

COFFEA is more especially required, in recent cases particularly, when the palpitation is attended with excessive nervous excitement, with suffocative attacks and excessive anxiety, attended with groundless apprehensions, torture of conscience, great despondency, restlessness, and sometimes complaints; or again, when sudden emotions of joy have induced the attack.

*Dose:* Six pills, as directed for *Aconitum*.

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#### ANGINA PECTORIS.—ALLOPATHIC TREATMENT.

Attacks of Angina Pectoris are most speedily relieved by the inhalation of five or six drops Nitrite of Amyl. If the circulation is feeble a teaspoonful of brandy, or one or two teaspoonsful of Ether or Hoffman's Anodyne may be given. The hypodermic injection of Morphine in doses of a third to half a grain is another effectual method. Mustard may be applied over the chest, and Mustard drafts to the extremities.

During the interval between the attacks, excitement of all kinds, active exercise, immoderate eating, and the use of Alcoholic liquors are to be avoided. The general health requires attention.

Arsenic appears to have the power of preventing the attacks, or lessening their severity. It may be given in the form of Fowler's Solution in doses of three to five drops three times a day in water, after meals. Its use should be directed by a physician. During its administration, if puffiness of the eye lids, or pain in the bowels occur, it should not be taken until these symptoms disappear.



## CHAPTER XXIV.

## DISEASES OF THE ARTERIES AND VEINS.

## DISEASES OF THE ARTERIES.

The various diseases of the arteries are of very little importance in a book like this, for the simple reason that they cannot be treated medicinally.

Arterial inflammation, mostly only a symptom of other diseases, is scarcely recognizable with positive certainty, even in the case of larger arterial trunks. Of course, an inflammation of the larger arteries is highly interesting, because the closure of an arterial trunk near the heart may give rise to cardiac hypertrophy.

Aneurisms (dilatation of an artery with rupture of one or more of its coats), are not exactly diseases, but consequences of other influences. We do not see how medicines are to accomplish anything in such cases. It is only the disturbances which such arterial lesions cause in the heart, that suggest the propriety of medicinal interference, and we regard it as downright absurdity to recommend medicines for the cure of aneurisms, as has indeed been done.

## DISEASES OF THE VEINS.

## PHLEBITIS.—INFLAMMATION OF VEINS.

Phlebitis, the correct diagnosis of which is a recent triumph, is, so far as its consequences are concerned, one of the most important of all known morbid processes. The veins of the lower extremities and of the cavity of the skull are particularly liable to inflammation, besides all the veins whose sides do not collapse, such as, above all other veins, those of the gravid uterus.

The causes of phlebitis are: Direct injuries of the vessel; coagulation arising from impediments to the circulation occasioned by dilatation of the vessel; introduction of foreign substances resulting in a decomposition of the blood. This last-named explanation is applicable to phlebitis which sets in in an epidemic form in limited localities; or else the disease may arise secondarily from inflammatory affections of neighboring parts, or of remote parts, but lying in the tract of the vein; or from puerperal conditions, suppurations of bones, especially caries of the bones of the ear.

The symptoms of phlebitis vary according to its extent and intensity. The most intense forms of phlebitis originate in suppuration to which we therefore refer; in this category belongs especially epidemic phlebitis, where the local process is rapidly extended through the whole organism. The less intense cases very usually set in with a chill recurring either irregularly with more or less frequency or otherwise, or else setting in typically, like an intermittent paroxysm. The diseased vein is often indicated by a seated, circumscribed, burning pain, but is quite

often altogether painless. The chill is succeeded by a feeling of illness, usually so severe that it is entirely out of all proportion to the objective symptoms. The pulse is accelerated and very much reduced in volume, the digestion is interfered with, a tendency to perspire sets in, the tract of the vein becomes œdematous. If the circulation in the vein is restored, all these symptoms may disappear as rapidly as they came. If the vein remains closed, œdema develops itself beyond the closure, and, if a collateral circulation can be established, may last only a short while, or else remain permanent. In such a case lassitude, chills at irregular intervals, irregular flashes of heat sometimes continue for weeks.

The terminations of phlebitis depend upon the changes going on in the inflammatory exudation. If no purulent decomposition takes place, life is not exactly in danger: if pus forms, it may be carried along with the current of blood, and a most malignant phlebitis may suddenly arise notwithstanding the trifling character of the symptoms at the outset of the inflammation. It is in this manner that lying-in women and persons that had been operated upon, often perish quite suddenly, although not a single symptom existed at first that could have given rise to the least apprehensions of danger.

The prognosis is uncertain. If the chills recur but seldom and with increasing weakness, the danger is less; whereas frequent chills, prostration and sopor, are decidedly ominous signs. The treatment should *only* be in the hands of the best physician you can possibly obtain.

The subsequently remaining and very prominent œdema of the parts which lose their normal circulation in consequence of the obstruction of the vein, cannot be removed by treatment. It does not disappear until the collateral circulation is restored, which it sometimes takes years to accomplish; the uniform pressure of a bandage, if it can be applied, may, if it does not effect a cure, afford at least a good deal of relief.

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## VARICOSE VEINS.

### PHLEBECTASIA—VARICES. DILATION OF VEINS.

In most cases the causes of these very frequent dilations can be determined with perfect certainty; in other cases, however, they are involved in obscurity. These are the cases where the disease cannot well be traced to some mechanical obstruction in the circulation of the blood. At all events, these cases are the least frequent.

The existence of a peculiar predisposition in the walls of the veins, or else the subsequent supervention of a morbid change in those walls, will have to be taken for granted. The most frequent causes are: Obliteration of the vein, owing to which the portion beyond the obliterated vein dilates in its whole extent; dilation or contraction of the venous trunk, which has the same effect as obliterations, only in a less degree; every change that interferes with the flow of blood to the heart, such as dilation of the right heart, affections of the liver, tumors compressing the vein, tight clothing. In all such cases, varicose veins are of a secondary

character ; it may likewise occur as a primary disease in the case of men who have to be continually in a position that interferes with the reflux of the blood, persons for instance who have to be continually in a sitting or standing posture. In a sitting posture, the dilation of the vessels can often be accounted for by the pressure exerted upon the abdominal organs in the stooping posture ; in the standing posture on the contrary the dilation is entirely owing to the circumstance that the vertical position of the body embarrasses the course of the blood onwards through the veins.

Every vein in the body may become dilated ; dilations occur most frequently in the veins of the rectum, (then called piles), lower extremities and spermatic cord. We will briefly dwell here upon varices of the lower extremities. They occur more frequently among women in whom the cause of the dilation is traceable to the impregnated uterus, whereas primary dilations are decidedly of more frequent occurrence among men. What we have said just now concerning the originating causes of dilation is particularly applicable to this form. At first one of the larger cutaneous veins of the leg is most commonly affected, whence it does not usually extend to the thigh, but involves very regularly the larger as well as the more minute veins of the foot, especially of the veins situated around the ankles, where they give rise to a considerable swelling covered with a bluish net of both delicate and coarser vessels. In most cases these varicose veins are painless. In other cases the leg pains for a short time, after which the pain again disappears. Very often the pain is felt while a portion of the skin assumes a bluish redness, swells and becomes quite hard ; the pain increases continually, finally the skin suddenly breaks at the place of infiltration, without being caused by mechanical injury as most of these patients fancy, and an ulcer of the size of a pea forms, which is at first round and provided with thin, somewhat undermined edges. Without proper management and hygienic precautions the pains increase all the time ; the ulcer spreads, its edges gradually swell, the surrounding skin becomes hypertrophied, (thickened) the ulcer secretes a watery and sometimes exceedingly fetid fluid, and its base has a sickly color. If the same mode of living is continued, during which walking hurts only a little, but standing hurts a great deal, the ulcer may spread over the whole surface of the leg from the ankle to the calf, and may even penetrate to the bone. Ulcers below the ankle and on the front portion of the foot are of rare occurrence. The fetor of the ulcer increases in proportion as the ulcer spreads over a larger surface. Persons go about with such ulcers for years, and it is inconceivable that the constant drain of their vital fluids does not result in speedy emaciation. If a fever or some other constitutional disease breaks out during the existence of the ulcer, it seems to heal spontaneously, in which case the disease is very commonly, but improperly, regarded as the consequence of the healing.

If the patients are so situated as to be able to remain at once in a recumbent posture, the little sores heal very speedily, but break open again very easily if the person has to stand a great deal, so that the existence of such ulcers at any previous period leaves a constant liability to their returning again at a subsequent time.

In the higher walks of life, where every measure is taken from the start to prevent the formation of ulcers, a peculiar cutaneous affection is witnessed in their stead. The skin assumes a very dark and bluish color, and scattered and violently itching pustules form very frequently, or else the skin peels off in scales, leaving the surface moist. This form of the varicose affection is by far the most malignant and distressing.

With an entire change in the mode of living the varicose ulcers may heal of themselves, but this is undoubtedly a very rare occurrence.

### ALLOPATHIC TREATMENT.

The radical cure of varicose veins is purely surgical and consists in obliterating the veins. The means for this purpose will be enumerated, but not described. The large trunk above the dilated veins is occluded to prevent the return flow of blood through it, and consequently through the dilated veins leading to it, by pressure from metallic clamps, by cauterization, by incision, by ligature, by electrolysis, by injection of the Subsulphate of Iron. These operations are effectual, but owing to occasional accidents resulting from the attempts to thus obliterate the veins, it is not attempted, except there is urgent necessity.

Palliative treatment requires an artificial support to the column of blood in the veins. In the lower extremities, this is done by an elastic stocking, a band stocking, or a well adapted bandage. They may be removed at night, but reapplied before the patient rises in the morning. In other situations than this most common one, the same principle will govern the treatment, and the ingenuity of the physician will meet the required indication, as in varicocele (varicose veins of the spermatic cord), a well adjusted suspensory bandage of silk or muslin will be constantly worn.

Varicose veins are subject to inflammation (phlebitis). If this condition occurs whether the veins are varicose, or not, the patient should remain in bed. If there are wounds or ulcers, they should be poulticed; if there is suppuration the surface of the wound or poultice should be lightly covered with Carbolic Acid in Glycerine, one or two drams to the ounce. Generally, without the temperature is too low, cool evaporating lotions over the inflamed veins will be most useful. A piece of muslin wet in a solution of forty grains of Sugar of Lead, and a scruple of Acetate of Morphine in a quart of water may be laid over the inflamed region, two to four ounces of Laudanum may be used instead of Morphine, the cloth should be kept constantly wet. In other cases hot fomentations are more suitable, towels or flannels may be rung out of hot water, spread over the inflamed surface, and covered to retain the heat, or hot poultices may be applied, Hops, Laudanum, Stramonium, (Jamestown weed), Tobacco, or Belladonna. A brisk cathartic should be given. One or two table-spoonsful of Epsom Salts, (Sulphate of Magnesia) is a suitable one. Steeping the Salts with a third its bulk of Coffee, covers the taste. Pain should be relieved with Opium in doses of a grain, a quarter of a grain of Morphine, or twenty-five drops of Laudanum. If the blood should become poisoned from the products of inflammation, Quinine in large doses, ten or fifteen grains four times a day for two or three days. Stimulants will be required.



Tonics, as two grains of Quinine four times a day are needed, if the disease continues long. The patient should, also, be well nourished.

#### HOMŒOPATHIC TREATMENT.

Painless varices, without ulceration, cannot be regarded as an object of treatment, nor do we believe that anybody can imagine the feasibility of removing them by means of medicines. If pains are felt, and the subcutaneous cellular tissue becomes infiltrated, it would seem as though medicines might be useful; at any rate we have seen a rapid improvement take place after the use of *Staphysagria*, *Lycopodium* and *Graphites*. These are the only remedies which we can recommend as long as the ulcers are painful. If the ulcer has become old, even the three first-named remedies are no longer of any use, and a mechanical treatment is the only treatment that can prove of any use. These three remedies are likewise the only ones that we can recommend for the peculiar cutaneous affection, but we must confess that they, too, will often leave us in the lurch. Our main resource in treating these varicose disorders are external or mechanical means. The dilatation of the veins being chiefly a passively mechanical change, it is evident that moderate compression by means of a good bandage will moderate and finally remove the varicose dilatation altogether. If individuals with marked varicose dilatations constantly wear a bandage, or silk elastic stocking, they will never be troubled with ulcers nor with any other cutaneous affection. Existing ulcers heal very rapidly under a carefully-applied bandage, so much more rapidly if we first cover them with strips of adhesive plaster and a layer of cotton wadding over these, so as to protect them from all contact with atmospheric air. By pursuing this course, we have never known ulcers of any size or of upwards of twenty years' standing to remain uncured; but we have never shunned the trouble of applying the bandage ourselves. The longest time it has taken us to heal these ulcers, is six months. If the excessive sensitiveness does not admit of the immediate application of a bandage, the patient must be kept for a short time in a recumbent position with his leg raised; in such a case, warm poultices afford a good deal of relief.

## Part Eleventh.

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### DISEASES OF SINGLE SYSTEMS.

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## CHAPTER XXV.

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### DISEASES OF THE BONES, MUSCLES, AND JOINTS.

#### OSTITIS, PERIOSTITIS—POTT'S DISEASE.

##### *Inflammation of the Bones and Periosteum.*

Inflammations of the bones occur in every age, less frequently, however, before the second and after the fiftieth or sixtieth year. In most cases they originate in mechanical injuries or mechanically acting influences; they are less frequently owing to the extension of inflammation from the soft parts. In the great majority of cases the mechanical is associated with a constitutional cause, very frequently the latter existing alone. Among the constitutional diseases it is more particularly scrofula, consumption, syphilis and calomel that give rise to ostitis. Very often it is very difficult to trace the cause with anything like certainty, especially, so far as an inflammation of the substance of the bones is concerned, because it generally develops itself with scarcely perceptible symptoms, and in a very insidious manner, hence too long a period of time may have elapsed since the cause first began to act, to permit of the disease being traced to a definite origin.

Bones that are but thinly covered by soft parts, are particularly exposed to inflammation from mechanical causes; inflammation arising from more dynamic or constitutional causes may attack any bone; nevertheless inflammations of the lower jaw, of the vertebræ (back bone), the bones of the hands and feet and of the ribs, occur most frequently and are of particular importance.

Periostitis (inflammation of the membrane covering the bones) occurs more particularly on the fingers, on the bones of the lower extremities and on the skull-bones.

The symptoms and course of ostitis differ very remarkably in extent as well as intensity. It is very often found that at the outset the disease is entirely without any symptoms, until the disease is finally revealed by the process of suppuration. It very seldom runs an acute and rapid course; this is generally the case, if the inflammation attacks the outer surface of the bone. In such a case the intensity of the pain depends upon the extent of the inflammation; the fever is high, delirium sometimes sets in, slight chills are common and the patient very soon begins to lose his strength. Cases of this kind, which run a rapid

course, always terminate in suppuration, and the artificial removal of pus is in most cases a matter of absolute necessity. After the pus is evacuated, a cure does not always take place immediately; the bone divested of its periosteum becomes more or less carious before a cicatrix has time to form.

If the periostitis runs a slow and somewhat chronic course, the inflammation of itself is not very painful; but very violent pains can be excited by contact; here too the exudation may be transformed into pus, but is likewise apt to result in bony growths and to form extensive flat or tuberculous bony indurations.

If the inflammation is located in the interior of the bone, the latter is generally distended in its whole length, is not very sensitive to pressure, but the patient is tormented by paroxysms of peculiar dull boring pains, which, even in the absence of any specific cause, are particularly apt to set in, and to become aggravated at night. These pains are usually felt for some time before the bone commences to swell; they interfere with the mobility of the limb more or less, generally the less the more remotely they are felt from the joint.

Ostitis of this central character always runs a chronic course. Its terminations are suppuration or ossification of the exudation. If one of the large bones is invaded by the suppurative process, death almost always results, although in some cases not till the patient has lived through year's of suffering. An important diagnostic symptom is the presence of albumen in the urine; it almost always occurs if the suppuration is extensive and augurs very badly for the final result.

The importance of inflammations of bones varies a good deal. Age exerts a characteristic influence; children and young people generally recover from such inflammations, even if these should last a long while, unless they originate in inveterate, constitutional maladies; older persons, especially when on the other side of forty, generally fall victims to such inflammations. Children very often recover when the second period of dentition sets in, or when they enter upon the period of pubescence. The seat of ostitis is of no small importance; inflammation of the bones in the upper part of the body is less dangerous than inflammation of the pelvic bones, or the bones of the lower extremities. It is likewise important to determine whether the inflammation is so located that vital organs may become involved; on this account inflammations of the skull bones and ribs are more threatening on account of the danger to important organs resulting from them.

Sometimes the inflammatory symptoms disappear entirely for a time, and then suddenly reappear again from some cause or other, or without any cause; or else, in one portion of the bone the inflammation runs a favorable course, and then all at once takes a new start either continuously in the tissue of the bone or in separate portions. Every inflammation involving more than one bone, renders the prognosis so much more unfavorable.

#### ALLOPATHIC TREATMENT.

Inflammation of bone can scarcely, in any case, be treated intelligently except by a skillful surgeon. Rest and cold or cooling applications are

the most important means of local treatment. If cold is not agreeable it should be replaced by hot fomentation—a flannel wrung out of hot water and applied to the part, then covered well to retain the heat.

In Chronic Ostitis counter-irritation by means of blisters or the frequent (daily) application of Tincture of Iodine should be resorted to. Sometimes deep incisions into the membrane covering the bone afford relief in both the acute and chronic forms of the disease.

Pus should be evacuated by the trephine (an instrument for taking out a disc of bone.) If the inflammation has continued long, especially at the end of a bone, it is probable pus has formed and the trephine should be used.

When the medullary tissue (marrow) of the bone is inflamed (Osteomyelitis) the bone as well as its medulla is generally involved. When the disease is the result of wounds, the dressings must often be changed and the wound disinfected with a solution of Carbolic Acid in water, one dram to the pint, or Chlorine water, or the solution of Chlorinated Soda (Labarrague's Solution) diluted until they are unirritating. Absolute cleanliness and fresh air must be secured. The diet should be good. Tonics may be necessary, two or three grains of Quinine three times a day seems the most suitable. Both tonics and stimulants may be employed.

Cold is often the most useful and may be applied by means of bags of ice. If cold causes pain or chills, hot applications should be used instead as directed for Ostitis. Free incisions through the periosteum (membrane covering the bone) and superficial tissues give some relief. If there is no opening into the cavity of the bone and from the amount of inflammation, and the length of time which has elapsed, there is reason to suspect pus has formed, the trephine should be used, and the pus let out. As a rule amputation is inadmissible, but if resorted to it must be at the nearest joint towards the direction of the body or above it.

In Chronic Osteomyelitis counter-irritation with Tincture of Iodine or blisters and the internal use of Iodide of Potassium in doses of ten grains or more, three times a day, should be resorted to. Where matter forms it should be let out with the trephine. Excision (taking out a piece) may be resorted to in the chronic affection, but not in the acute. When amputation is called for, it may often be performed through the shaft of the affected bone, if the point of amputation is well above the diseased portion.

Periostitis (inflammation of the periosteum membrane covering bone), in acute cases, requires perfect rest. Cold should be applied, either of cold water or bags of ice. If these cause pain, hot fomentations should be applied, or hot poultices used. Pain must be relieved by Opium in doses of a grain, a quarter of a grain of Morphine, or thirty drops of Laudanum given one, two, or more hours apart as may be required. If these means do not succeed free incisions must be made through the periosteum. If the disease is primary, and necrosis (death of bone) follow, it is generally confined to the outer lamina (layer). If the disease is secondary, resulting from ostitis or osteomyelitis, and necrosis occurs, it is much more extensive, which will be considered under necrosis. Specific forms of this dis-



ease (periostitis) from syphilis, scrofula, etc., generally yield to appropriate constitutional treatment.

One of the results of inflamed bone is caries,—a kind of surface softening and disintegration of the bone tissue. The constitutional treatment relates to the cause of the inflammation, whether specific or scrofulous, and the appropriate constitutional remedies should be taken. In the former case Iodide of Potassium, or Murcury, or both and Iron. In the latter, Iodide of Potassium, Iron and other Tonics.

The local treatment consists in the complete removal of all the diseased portion. First, by excision with instruments; second, by the application of Acids. When a joint is carious, amputation is generally required, though sometimes excision may be practiced.

Another of the results of inflammation of bone, and its membranes is necrosis (death of bone). The treatment required is its removal. While it remains, it is only a source of irritation; but its removal must not be attempted before complete separation has taken place. The suppuration which has gone on during the process of separation generally requires supporting treatment—Tonics of Iron, Quinine, nutritious food, and in some instances, Cod Liver Oil.

#### HOMŒOPATHIC TREATMENT.

The frequent occurrence of ostitis in individuals whose constitutions are tainted with some constitutional dyscrasia, invites a careful inquiry into the presence of such a constitutional taint, even though not manifested by any outward signs; and, in the second place, to employ such remedies as not only correspond with the constitutional affection, but likewise aim at remedying the local disease. A mere comparison of symptoms will scarcely ever answer the purpose, for the reason that the localities may differ too much; it is only for a few definite localizations of ostitis that we possess real remedies. In general we advise therefore that the general, not the local symptoms be taken as our guide; on this account we mention the following remedies with a few short comments:

MERCURIUS is a medicine of whose specific and almost constantly definite relation to the osseous tissue we may always rest satisfied. It is indeed suitable in most cases of ostitis and periostitis, provided they do not originate in calomel poisoning. It is particularly indicated by: Violent bone-pains, distention, swelling, redness of the skin, and in general by the more acute symptoms of the disease. The infantile organism is more rapidly and certainly affected by Mercurius. The dose had better be as small as possible; the slow course of the disease would seem to point to small doses and given at comparatively long intervals, as preferable to large doses of this agent.

*Dose:* Four pills daily.

MEZEREUM antidotes Calomel in the bone-range. Mezereum is particularly adapted to periostitis; less to ostitis, and is particularly appropriate at a period of the disease when no complete suppuration has yet set in.

*Dose:* Four pills daily.

PHOSPHORIC ACID is generally preferred to Nitric Acid in non-mercurial ostitis ; it is indicated in the inflammatory bone-affections of children, especially in inflammations of the vertebræ, (back bone) if there is an evident disposition to caries. In fully developed caries with symptoms of slow hectic fever, Phosphoric Acid is one of the most important remedies.

*Dose :* Four pills daily.

PHOSPHORUS is inferior to Phosphoric Acid, for the reason that the latter acts more specifically and more penetratingly in chronic affections. In other respects the curative action of both remedies is very similar ; we would accord the preference to Phosphorus, if consumption with unceasing diarrhœa has set in.

*Dose :* As for Mercurius.

STAPHYSAGRIA is indicated, if the ostitis runs its course with severe pains, and the bone and its covering are affected at the same time ; in the case of scrofulous individuals ; if the facial bones or those of the legs and feet are involved.

*Dose :* Same as for Mercurius.

BARYTA CARBONICA is eminently adapted to a slow and almost painless scrofulous inflammation of the bones of the extremities, after suppuration has begun to set in.

*Dose :* As for Mercurius.

AURUM is, like Nitric Acid, an exquisitely anti-Calomel medicine, and hence deserves special attention in cases of mercurial ostitis. It has likewise an excellent effect in non-mercurial ostitis with caries, and violent pains, especially at night. Aurum is a specific remedy for inflammatory ulceration of the nasal bones and facial bones generally. In affections of this kind we prefer Aurum muriaticum to the common gold.

*Dose :* As for Mercurius.

SILICEA is one of the most important remedies in caries from any cause and at any age, as soon as the inflammatory stage has run its course ; it is adapted to every constitution, but may not have a very favorable effect in acute ichorous suppuration. We must not forget that Silicea acts very slowly ; we recommend small doses at long intervals.

*Dose :* Same as above.

CALCAREA. This agent is not so much indicated in uncomplicated ostitis, as in ostitis depending upon scrofula ; it does not act directly as a curative, but by virtue of the favorable change it effects in the scrofulous disease. On this account its use should be deferred until the suppurative process is fully established.

*Dose :* Same as for Merc.

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## RICKETS.

EARLY SIGNS.—This distressing disease commonly begins to show itself about the tender age of from one to two years. It is generally preceded, for a longer or a shorter period, by derangement of the general

health, before any of its well-known characteristic features become developed.

Pale and sickly countenance; dry, harsh skin; soft and flabby flesh; irregular appetite, sometimes with desire for indigestible or unnatural food; constipation or diarrhoea; general febrile excitement, fretfulness, and languor.

GENERAL SYMPTOMS.—After which, the head is observed to become preternaturally enlarged, and the forehead unusually prominent. The breast-bone projects; the ribs appear flattened; the belly is much distended; while the rest of the body, and the limbs in particular, are greatly emaciated, and the debility is extreme. As the disease advances, the muscles become more flaccid, the wrists and ankles become swollen, the legs, thighs, and arms distorted, and the spine partakes in the general deformity, by becoming shorter, and curved in various directions.

When the disease is early attended to, and the more general exciting causes,—such as defective nursing, damp or wet, ill-ventilated dwellings, insufficient exercise out of doors, improper food, and uncleanness,—are capable of being removed,—the chances of recovery are much increased, and the deformity is frequently materially, if not wholly, diminished as the patient grows up. Otherwise, if life be spared, it is liable to be rendered miserable by a state of almost continuous suffering.

#### HOMŒOPATHIC TREATMENT.

When there is an hereditary predisposition to this disease, too great attention cannot be paid to the first manifestations of ill-health. Great care should, at the same time, be taken to avoid undue pressure upon the chest and other parts. The bones of a rickety child are wanting in the natural and requisite strength or firmness to support the weight of the frame. Consequently, when every precaution is not adopted, and the child is allowed, or rather compelled, by its heedless or culpable parents or others, to use muscular exertion, deformity invariably results. It will, therefore, be necessary to deal gently and cautiously with the child from the first day of its earthly existence. And while every care is observed to escape the mischief alluded to, other means, having for their object the improvement of health, must be strictly followed. The child should be regularly in the open air, when the weather permits; its apartments ought to be well ventilated; its personal cleanliness should be constantly ensured; and wholesome and appropriate nourishment provided. When the health and strength are improving, but the limbs and other parts have become deformed to a greater or less extent, in defiance of every solicitude,—or, as more frequently happens, from oft-repeated infractions of the rules laid down,—considerable benefit may yet be accomplished by judiciously applied mechanical aid.

#### MECHANICAL MEASURES.

At the head of the artificial contrivances for counteracting deformity, may be placed the gentle and cautious use of gymnastic exercises, as soon as the child is old enough to undergo them; and it is surprising how early they may be advantageously resorted to. Without these, all instruments are often futile, not to say hurtful. But in *combination with them*,

the objection to the temporary employment of an appropriate apparatus for the purpose of exercising compression, is I believe, in certain cases removed. I allude, more especially, to the instance in which the legs have become very much bent, either in consequence of neglect, or from its having been found impracticable to prevent a high-spirited child from constantly getting on his feet before his delicate frame had become sufficiently invigorated by suitable treatment. I am free to admit, however, that instruments should always be rejected whenever and wherever they can possibly be dispensed with.

CALCAREA is a medicine of the most essential importance in all cases of rickety disease, and is more particularly required when the fontanels remain open too long, and when the process of teething is unduly protracted, or the teeth that are protruding have a tendency to premature decay; or, again, when there is curvature of the spine and of the limbs, with enlargement of the joints, and very undue dimensions of the skull. Calcarea, again, is yet more especially indicated, if, in addition to these manifestations, there be incrustations on the face, or if the belly be enlarged and hard, and whilst rapid or gradual loss of flesh takes place, the appetite is morbidly voracious; the skin is commonly dry and flaccid, and the child wears the appearance of being much older than it really is, although it be commonly diminutive and fragile; the bowels are habitually costive, or are frequently affected with excessive and protracted relaxation.

*Dose:* Four pills in a teaspoonful of water, the first thing every morning, for a week (unless decided change should sooner occur); then pause ten days; after which the course should be repeated as before, and so on, until some distinct signs of general improvement follow.

BARYTA CARBONICA will be found adapted to some cases, particularly of dwarfish children, where there appears to be a general arrest and suspension of development, particularly if there be a tendency to glandular enlargements in the neck and elsewhere.

*Dose:* As directed for Calcarea.

MERCURIUS should be employed if the following symptoms should ensue:—Pains in the bones, as if soreness, or as if bruised, with extreme tenderness of the shin-bone and knee-joints to pressure, with or without pressure of the limbs; dandruff, and other obstinate affections of the scalp and face; incrustations on the face; extreme susceptibility to take cold, with constant or very frequent prevalence of cold in the head or on the chest, and tendency to excessive perspiration, whether offensive or not; and often a chronic, slimy, or clay-colored diarrhœa.

*Dose:* As directed for Calcarea.

SILICEA is appropriate to the treatment of almost all cases of disease of the bones; and is more particularly and decisively indicated by a peculiar tendency to ulceration manifested by the skin upon the least abrasion,—that is, when it "*heals badly*," as it is popularly termed; or when there are scabby eruptions on the scalp, the glands being disposed to suppurate, the complexion pallid but puffy, and the ears being constantly or frequently affected with discharges of matter. Silicea may be required after Calcarea, to complete the cure.

*Dose:* As directed for Calcarea.



SULPHUR should be employed after Calcareo or Silicea, if these medicines, having previously been productive of decided good effect, should cease to operate so beneficially, or if the following symptoms should prevail (which, if predominant, however, might more distinctly indicate the employment of Sulphur at the onset):—Extreme susceptibility to take cold, and to protracted discharges from the nose or from the wind-pipe, or to excessive or continued relaxation of the bowels; but still more especially by obstinate and intractable *constipation*, with flabbiness of the flesh or skin, pallor or puffiness of the face; protracted inability to use the legs or to maintain the erect position; tendency to be easily thrown into a violent perspiration by any exertion; the skin being otherwise dry, and even harsh, and the eyes and eyelids appearing to be habitually more or less inflamed, and both mind and body *languid*, and unfit for exertion of any kind.

#### ALLOPATHIC TREATMENT.

This is a disease which almost without exception depends on poor feeding and hygiene during the first year of the child's life. Children of unhealthy parents are more liable to the disease, but if the child is well fed, has plenty of fresh air, is kept clean, and is warmly clad, it will not have rickets. If the child is not thriving on its mother's milk it ought to be fed artificially, or, what is better, a vigorous wet nurse procured. In the absence of a wet-nurse rich, fresh cow's or goat's milk may be given. For the first month the milk should be half water, enriched a little with cream, and sweetened with sugar of milk or loaf sugar. At two months old only a quarter part of water need be added; after three or four months genuine milk may be given pure. Eggs beaten up raw with a little sugar and diluted with water may be given if the child likes it. The juice of lean meat may also be given. Strong beef tea made from finely chopped lean meat and cold water, gradually raising the temperature to 160° and maintaining it at that temperature for four hours may be employed for nourishment. Underdone lean beef finely ground in a mortar, a teaspoonful at a time, may be given. A pound of finely-chopped lean meat with eight ounces of distilled water and eight to ten drops of Hydrochloric Acid and a third to half a teaspoonful of common salt, allowed to macerate for three hours and strained through a hair sieve, then pour on the meat a couple of ounces more of distilled water and squeeze it through. The residue makes a nourishing and valuable food in cases of debility. Milk, however, is the food for babies, and the other articles of food may be resorted to only when the baby does not thrive sufficiently on the milk.

From the age of six months to a year, farinaceous food may be given in restricted quantities. One of the best forms is Liebig's Food. Take a heaping tablespoonful of wheat flour (middlings is better), a heaping dessertspoonful of malt flour, seven and a quarter grains of Carbonate of Potash and an ounce of water. Mix well. Add five ounces of cow's milk and heat gently. When the mixture begins to thicken, remove from the fire and stir for five minutes, heat and stir again until it becomes quite fluid, then boil and strain through a sieve, when it is ready for use. In the absence of malt flour barley may be ground in a coffee mill and

sifted to remove the husk. This food is a little laxative so it cannot be given more than three times a day. If there is diarrhoea twenty or thirty grains of prepared chalk may be used instead of the Bicarbonate of Potash.

For older children the diet must be good containing such articles as meat, eggs, and milk.

Nothing must be done to weaken, but everything to strengthen the patient. The child should have such exercise as is consistent with the weakened condition of the bones, such as rolling and tumbling on a hard mattress. Older children may walk about some, if provided with proper artificial support, such as a wheel crutch. They should be taken out into the open air every day, or two or three times a day for a ride, or carried out. Bending of the limbs may be overcome by applying a light splint of pasteboard or leather, but the limbs must not be so encumbered as to prevent their pretty free use. A light apparatus may be worn when the child walks, to prevent the curvature of the spine. The child should lie upon a flat mattress without a pillow.

The principal treatment is dietary and hygienic as given above.

For medicinal treatment the Compound Syrup of the Lacto-Phosphates give the most promise of all medicines of being useful, excepting Cod Liver Oil. It may be given in doses of from ten or fifteen drops to a teaspoonful according to the age of the child, three or four times a day. The dose of Cod Liver Oil may be begun at fifteen to twenty drops and increased to a teaspoonful or a dessertspoonful according to the age of the child and given four times a day. If the oil deranges the digestion it should not be given, otherwise it should be given continuously. Other tonics may be given instead of the Lacto-Phosphates as the Syrups of the Phosphates or Hypophosphites in the same doses as the Lacto-Phosphates. The Citrate of Quinine and Iron in doses of half a grain to two grains, three times a day.

Complications (other diseases) which may occur will require the appropriate treatment, keeping this in view that all treatment must be sustaining.

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## LUMBAGO.

### CRICK IN THE BACK.

**DIAGNOSIS.**—Violent pain, of a rheumatic character, in the lumbar region, either periodical or permanent, frequently accompanied with a considerable degree of fever.

### HOMŒOPATHIC TREATMENT.

**ACONITE** may be given at the commencement, if such fever declare itself.

**BRYONIA** when the pains in the back are of a severe aching or lancinating description, constraining the individual to walk in a stooping posture; aggravated by the slightest motion, or draught of cold air, and attended with a general sensation of chilliness.

*NUX-VOMICA* is particularly indicated when the pains resemble those produced by a bruise, or by excessive *fatigue*; also when they are much increased by motion and by turning in bed at night, and are attended with considerable weakness; and moreover, when irritability of temper and constipation are present. *Nux-vomica* is often of great service after *Bryonia* in acute lumbago. In chronic cases it is a remedy of no mean importance.

*RHUS-TOXICODENDRON* is almost specific. It should be preferred to any remedy when the symptoms are as follows: Dragging or shooting pains in the dorsal and lumbar regions: severe aching or pain as if from the effects of a bruise or a sprain in the loins; a feeling of stiffness or tension in the affected parts on attempting to move, but *aggravation of the pains when in a state of rest*, or when pressure is made on the seat of the sufferings. It is also a useful remedy in chronic cases.

*BELLADONNA*, where the pains are deeply seated, causing a sensation of heaviness, gnawing, or stiffness; it may follow *Aconite* with considerable benefit, when slight inflammatory symptoms are present.

*PULSATILLA*, when the pains, resembling those mentioned under *NUX-VOMICA*, are moreover attended with a sensation of tension or constriction at the affected part; it is particularly indicated for females, or individuals of mild, sensitive, or phlegmatic temperaments.

*MERCURIUS*, when the pains are much of the same description as those given under *Nux-vomica*, but considerably aggravated at night, incapacitating the sufferer from taking rest. (See *RHEUMATISM*.)

#### ALLOPATHIC TREATMENT.

In acute Lumbago, the employment of strong mustard-plasters or repeated hot wet packs, with a hypodermic injection of a quarter of a grain of Morphine over the seat of pain, repeated sufficiently often to subdue the pain, is generally effectual treatment. A cathartic should be given to move the bowels.

If the disease does not subside after the pain is relieved and the bowels moved, the treatment by mustard-plasters or hot wet packs and Opium should be tried to relieve pain (a quarter of a grain of Morphine, a grain of Opium, or twenty-five drops of Laudanum, may be given by the mouth), and should be continued.

The effect of Salicylic Acid, given in doses of ten grains every four hours, should be tried. It can be given in capsules, or mixed with Starch.

Chronic Lumbago is most frequently cured by Iodide of Potassium, given in doses of from ten to twenty grains, three times a day. It may be given in Peppermint Water, after meals.

Much relief may be obtained by wearing a Belladonna plaster across the loin.

Other remedies are the same as those recommended for chronic muscular rheumatism.

## INFLAMMATION OF THE JOINTS.

## ALLOPATHIC TREATMENT.

Acute inflammation of a joint (synovitis), demands in the first place, absolute rest. This is imperative and invariable. This object may be aided by properly adjusted splints. The limb should be in a position, which will relieve the articular surfaces from pressure. If the affected joint is in the lower extremity, the limb should be in the straight position. If the affection is in the knee, or hip joint, a degree of extension may be secured by the weight and pulley, as used for fractured thigh (described in the treatment for hip joint disease), and relief from pain secured in this way. Rest and extension which will separate the joint surfaces, and keep them apart, is in most cases all the treatment needed to ensure recovery.

Counter irritation by applying Tincture of Iodine, or blisters, the use of cold by ice bags, compression with bandages, and a wet sponge, etc., have all, in some cases, been useful, and are sometimes hurtful, and do not compare with the means just described in efficacy. When the inflammation and heat in the joint is great, a Solution of Sugar of Lead and Opium will benefit. Take of Sugar of Lead thirty grains, Acetate of Morphine five to ten grains, (or two ounces of Laudanum, and rain water a quart, Mix and it is ready for use. The internal use of Opium may be called for by the severe pain.

In Chronic Synovitis rest and traction, as in the acute, are appropriate means of treatment. The use of blisters and other forms of counter-irritation are more useful and less often hurtful. The constitutional state is generally faulty. This is to be corrected by good nutritious food, fresh air, exercise and sometimes tonics. The Citrate of Iron and Quinine is as frequently useful as any and may be given in doses of three grains, three times a day if the patient is feeble.

If absolute rest is enforced in this trouble the joint lacks its natural stimulus—that of motion. At the proper time (which is difficult to determine often) passive motion (moving the joint by the hands of others) must be resorted to, and after a time (which individual judgment only can determine) active motion (by the patient) may be tried. After several weeks have passed it is best to try passive and then active motion.

Passive, then active motion, good food, air, and good hygiene generally, have often restored swollen, painful and stiff joints in a few weeks to their natural activity.

It is often desirable to keep the surfaces of the joint apart by traction even when motion, both active and passive, is practiced. The weight of the limb may be sufficient in case of the upper extremity. In the lower extremities which must sustain the weight of the body, the end is met by very ingenious splints, invented by Dr. Sayre, of New York. Varieties are made for use of the different joints, hip, knee, and ankle. When these splints are properly adapted, the patient can go about without pain. In this way the functions of the joint are maintained while all irritation is obviated, and the most favorable condition is maintained for recovery.



## COXALGIA.

## INFLAMMATION OF THE HIP-JOINT.

This inflammation, the chronic form of which is called "voluntary limping," cannot be traced to any definite cause. It affects principally children and young people during the first years of pubescence. Its extremely frequent occurrence during the years fourteen to seventeen, and in persons of rapid growth, leads us to infer that a rapid growth of the bones constitutes a disposition to this inflammation, and that an exertion, a cold or other scarcely apparent circumstances simply act as exciting causes.

Acute inflammation of the hip-joint sets in suddenly even with a violent chill, like all other acute inflammations, with which severe pains are associated. The patient locates these pains at times in the small of the back, at other times more in front, very seldom in the hip-joint; they are extremely acute, tearing, burning, stitching, shooting, aggravated by every motion of the lower extremities, not altogether, and sometimes not at all, relieved by horizontal posture. At the same time a high fever accompanies the pains, the pulse being not unfrequently upwards of 120; this circumstance distinguishes the disease from lumbago with which it is easily confounded. Amid symptoms of this kind which may become sufficiently intense to simulate typhus, the following objective changes become manifest in one, two or more weeks: The affected hip and the buttock of the same side swell, so that the fold between the nates is much deeper; the thigh is somewhat turned outwards and slightly drawn up towards the abdomen; the knee is half bent; extension and rotation of the thigh are very painful; nor can these movements be executed completely. Walking is not entirely impossible, but can only be performed with the greatest pain. It is very seldom that an improvement begins at this point; as a rule an extensive suppuration sets in, amid frequent chills and burning heat of the skin. After this, a short intermission seems to take place in the further development of the disease, until the abscess reaches the skin and bursts. This may take place backwards, to one side, or in front. After the pus is discharged, the patient feels much better, and then worse again, provided the suppuration becomes very profuse and continuous. As a rule the prospect of a speedy closure of the cavity is very slim.

The terminations of the disease are: Very rarely a complete and rapid restoration; long-lasting suppuration with final recovery and a total or partial destruction of the joint.

The Chronic or subacute disease presents a very different group of symptoms. The disease commences with vague symptoms in the hip-joint resembling rheumatic pains and alternately exacerbating, remitting, or even intermitting for some time. These pains may be absent and in their stead the patient may only complain of a stiff joint which is more especially felt during motion. Sensible pressure on the hip-joint generally causes more or less pain, and the thigh is usually rotated outwards to some extent as soon as the disease commences. With such trifling symp-

toms it may go on for some time, before more serious changes become manifest. The pains increase in intensity and cause the patient to limp, the thigh is slightly flexed and turned inwards. Almost without an exception a more or less violent pain is at the same time felt in the knee, very generally surpassing the pain in the hip-joint in intensity. The affected limb becomes lengthened, its muscles become relaxed and flabby. In the further course of the disease suppuration sets in, the pus escaping on the outside and destroying life by caries and hectic fever. A cure at this stage is a rare occurrence, or else the parts grow together and the joint is permanently stiff.

### ALLOPATHIC TREATMENT.

Hip-joint disease is simply an inflammation of that joint, and is to be treated as already described for inflammation of the joints.

In incipient hip-joint disease, rest in bed and the straight position, with extension with the weight and pulley, is to be maintained, the weight being sufficient to relieve pain. This will vary from three or four to ten pounds. The mode of its application by long adhesive plasters applied to the sides of the leg and well secured by a bandage above the ankle.

The foot and ankle should be bandaged, but the plasters must not be included within this part of the bandage.

The lower end of the plasters are then fastened to a narrow board (with a hole in the center) which is long enough to separate the plasters from the ankle, and so prevent irritation, a rope is knotted and passed through the hole in the board which is attached to the plasters. The rope is then passed over a pulley fastened to the foot of the bed, and the weight then fastened to the rope. The rope must draw in the line of the limb. In addition to this treatment, good hygiene, which consists in plenty of fresh air, comfortable temperature of the room, sponging of the body every other day, with water at an agreeable temperature; good, nutritious food and cheerful surroundings, will be sufficient to carry the patient through the acute inflammation to recovery.

It is best to bring the limb at once to a straight line, and the weight applied. It ought not to cause pain, or at least after a few hours.

This treatment should continue six weeks or longer. The time comes when exercise must be secured, and at the same time extension continued. This is best secured by a suitable splint for hip-joint disease. There are several varieties of apparatus adapted to this end; one of the best is Dr. Sayre's. The splints of Davis or Bauer meet the required end.

Many cases have been successfully treated by the use of the wire-gauze splint of Hamilton or Barwell. If these are used, the body is to be supported by crutches.

A sole-leather, felt or gutta-percha splint, similarly constructed, will meet the end. It should extend from the top of the ilium (hip-bone) to above the knee, and broad enough to cover the thigh one-half in. A projection from the top of the splint behind, three or four inches wide,

should extend nearly around the body and fastened in front with a strong piece of elastic band.

Leather should be softened with cold water, and gutta-percha with hot water, and moulded to the limb and pelvis, and retained with a bandage, until it hardens. The inside of the thigh should be covered with a suitable short splint. After the splint hardens, permanent fastenings can be attached.

This method of treatment, faithfully and intelligently carried out, as a rule, obviate the necessity of an operation, and secure a satisfactory result. When the disease progresses until the bone becomes extensively diseased, an operation for its removal is demanded.

#### HOMŒOPATHIC TREATMENT.

Although the number of homœopathic remedies for hip joint disease is but small, yet the success with which they are used in this disease, is a source of pride to our practice. In view of the almost positive certainty of a correct diagnosis in most cases of hip-disease, the clinical results that have been obtained in the treatment of this disorder, may be regarded as absolutely reliable testimony.

**RHUS TOX.** At the outset of the disease, when violent fever, hurried pulse, rheumatic pain from the hip to the foot, and constant desire to gain relief by a change of position, but before pus has actually formed, will be found an excellent remedy.

*Dose:* Six pills in a spoonful of water, every five to twenty-four hours.

**BELLADONNA.** Under almost the same indications as *Rhus Tox*, except the restlessness is not so marked, and there is more of a tendency to a dark-red appearance of the skin over the affected parts; showing a deep inflammation.

*Dose:* As for *Rhus Tox*.

**MERCURIUS.** If the formation of pus has really commenced, no remedy will compare with this, being frequently able to arrest the disease and restore the patient to health as far as the nature of the attack will permit any remedy to do so.

*Dose:* Six pills, or a small powder, three or four times a day.

**CALCAREA CARB.** After the disease has turned or shows marked signs of turning for the better, helps very much by aiding in the nutrition of the parts affected as well as the system in general.

*Dose:* Six pills twice each day.

The rest of the treatment may be condensed in the following points: The patients should not remain in a state of absolute rest, on the contrary, they had better move about by means of crutches. If pus forms, warm poultices may be applied; they not only promote the formation of pus, but very often favor its reabsorption. Only if serious destruction of the joint has taken place, the patients will have to remain quiet lest spontaneous luxation should result; in such circumstances a suitable extension apparatus may be resorted to, which will have to be applied, however, with a great deal of caution. The diet should be at all times plain and strengthening; the use of fat is to be rigidly prohibited.

## GONITIS, INFLAMMATION OF THE KNEE-JOINT.

## WHITE SWELLING.

This is one of the most frequently-occurring inflammations of joints; owing to the exposed situation of the knees, this might indeed be expected.

A simple inflammation of the knee, is generally the result of some mechanical injury or of excessive use, and is an unimportant affection as long as the inflammation is confined to the integuments. It is scarcely ever attended with fever, is never ushered in by a chill, and runs its course within a few weeks. However, as we can never be sure whether such an unimportant disease may not result in the more dangerous white swelling, it ought to be managed with all due precaution.

**SYMPTOMS.** While using the joint, the patient complains of pain and impaired mobility; in more rapidly progressing cases the temperature of the joint is higher than usual. If the inflammation emanates from the soft parts, the pains are generally less than when the bones constitute the starting-point. Sometimes the knee swells rapidly, at other times more slowly, and most slowly if the bones receive the first shock of the disease. In the latter case the knee preserves its form for a long time, in the other cases the swelling soon modifies any former shape of the knee. As the swelling increases, which generally has a very white appearance, it grows progressively softer, elastic, and finally shows symptoms of fluctuation. The cutaneous veins become very much enlarged. The pains generally increase with an increase of the swelling. Sometimes not till after the lapse of years, and, in a few cases, after that of weeks, distinct fluctuation is perceived in one or more places; here the skin reddens, breaks, and a pus which is mostly thin and mixed, is discharged. In spite of the evacuation of pus, the swelling remains almost unchanged.

The suppuration in a case of white swelling is generally very tardy. The openings may close for a short time, after which they generally open again, so that, in a fortunate case, suppuration may cease after many months, and the swelling may grow smaller, but the joint remains stiff and thick, and the leg somewhat bent. A cure of this disease is witnessed only in the case of young people. If the case terminates less favorably, the suppuration gradually superinduces hectic fever, and finally ends in death.

The prognosis is always bad, for no one escapes from such an attack without some permanent injury; the difference in favor of young and robust individuals is, that death needs not be apprehended in their case, which is generally sure to occur in individuals of upwards of thirty years of age.

## ALLOPATHIC TREATMENT.

The treatment of inflammatory disease of the knee does not differ materially from that given for inflammation of the hip-joint, and joints in general. Rest is the first essential; this may be secured, first, by applying a splint to the posterior of the limb, including both the thigh and leg, to keep the joint perfectly still. Cold applications, or warm, as give the most relief may be employed. The hot wet pack applied to the knee will be useful if cold causes pain.



The evaporating solution of Lead and Opium, given in the treatment of Synovitis may be used. If the joint continues painful pull moderately on the ankle to separate the ends of the bones in the joint, and if this gives relief the weight and pulley should be employed to produce extension, as directed for disease of the hip. A large amount of water in the joint, producing enlargement, should be met by pressure, either an elastic band or bandage and wet sponge. Pressure would be painful and harmful without extension. After six weeks or more have passed exercise of the joint becomes necessary, but extension must be continued. This can be done by the proper application of a Sayre's splint for the knee-joint. If the limb is distorted, the tendons necessary must be divided to bring it into shape.

When the fluid in the joint is not removed by absorption from pressure, and friction, (rubbing with a simple liniment), aiding nature, it is necessary to remove the liquid with an aspirator, or possibly by incision, but the wound must be hermetically sealed immediately, and the joint kept motionless by a well-secured splint until the wound heals.

Nearly if not all cases can be cured by absolute and permanent rest; extension has been indicated, and, in some cases, compression.

When the inflammatory disease in a joint has advanced to suppuration and decay of tissues, it is commonly spoken of as a "white swelling." If it is the knee-joint that is affected, it is then known as "white swelling of the knee-joint." The treatment described for inflammation of the knee or joints, if properly carried out, will prevent this undesirable state of affairs. If it occurs there is pain, irritation, fever, loss of appetite and debility. Extension by means of Sayre's splint for the knee (or for such other joint as is affected) must be made. This will relieve the pain. The services of a surgeon are necessary in the management of these cases. If it is impossible to procure a splint, extension should be made with a weight and pulley. There is the disadvantage of confinement with this manner of extension at a time when it is very important for the patient to be much in the open air. The patient should have the benefit of fresh air, sunlight, and good food.

Tonics may be required. There is no better one than the Citrate of Iron and Quinine, given in doses of one to four grains, three times a day. The Compound Syrup of Hypophosphites is another useful one, especially if there is much discharge, as also is the Compound Syrup of the Lacto-Phosphates. The dose of each is a teaspoonful. The former syrup may be combined with a fourth Dilute Phosphoric Acid. The dose then will be the same.

When an inflamed joint, acute or chronic, will permit the two surfaces of the joint to come together by a jar, without pain, and when there is no pain on pressure, the instruments may be removed. A condition of irritability remains and the joint cannot be used without pain. The case requires passive motion and rubbing. Gentle but thorough friction to restore the functions of the joint, remove the congestion and irritability. The pretense that the hands of some persons have especial power in this direction is simply *pretense*. In the successful cases under their hands they have only by accident stumbled upon the case at a stage when the

rubbing was the element necessary to restore the use of the joint. One so-called cure of this kind at the hands of a pretender is the source of a wonderful amount of fame to the injury of society, and an unfavorable reflection is made on the medical profession which is unjust.

### HOMŒOPATHIC TREATMENT.

SILICEA is the medicine of chief importance in the treatment of inflammation of the lining, or covering membrane of the knee-joints, or for the treatment of the enlargements, and other mischiefs resulting from such inflammation.

*Dose:* Six pills in a teaspoonful of water, three times a day.

SULPHUR AND CALCAREA are indicated at the onset, or after the previous administration of some other medicine, to complete the cure. They are of chief importance in *scrofulous enlargements of the knee*, and may also be required as *intermediary* remedies, when other medicines, apparently indicated, cease to produce any decided effect.

*Dose:* Give six pills in a tablespoonful of water, every morning and evening.

BRYONIA may be given if the trouble results after rheumatism, with red and very painful swelling of the knee, particularly if the slightest motion aggravates the pain.

*Dose:* Same as *Silicea*.

PULSATILLA is an excellent remedy for the treatment of glazed or shining, white, soft, or doughy swellings of the knee, and is, indeed, more or less especially appropriate for the treatment of *soft, colorless* swellings of the knee, in general, whether painful or otherwise.

*Dose:* In every particular as directed for *Bryonia* and *Silicea*.

External applications are not always appropriate in this disease. Poultices are injurious if they increase the pains; in most cases they not only relieve the pain, but likewise exert a favorable effect upon the re-absorption of the pus in the diseased joint. An uninterrupted recumbent posture is to be avoided as long as the patients remain capable of moving about; only the diseased limb must not be used for a walk. A moderate and constant pressure by a starched bandage is only borne, if the bones are not too much diseased; it has the double advantage of antagonizing the swelling and protecting the limb during motion. It has the best effect, if the abscess has already broke, for, in such a case, the bandage most decidedly promotes the course of the suppurative process. Amputation is only advisable if the joint is utterly disorganized and the constitution begins to show signs of failing under the constant pain and loss of fluids.

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## INFLAMMATION OF THE JOINTS OF THE FOOT.

### TARSUS.

The inflammation is either seated in the bones or where they articulate with those of the metatarsus; or else in the articulation of the tar-

sus and tibia, or in both localities at the same time. Here, too, mechanical injuries are rarely the cause of the inflammation. An inflammation of the metatarsus is particularly met with among children and during the age of pubescence; an inflammation of the tibia-tarsal articulation occurs more frequently among adults.

THE SYMPTOMS are most commonly the following: At first a pain is felt in walking, particularly during certain positions of the foot; in a state of rest the pain subsides almost entirely. Gradually the joint begins to swell, the swelling increasing more and more and gradually extending over the whole foot; at the same time the pains increase, become continuous, and walking is entirely out of the question. At last the pus finds an outlet in one or more places. In favorable cases the suppuration now decreases, the strength keeps up, the fistulous openings close, although sometimes not till years have elapsed. Or else, the swelling continues to increase even after the bursting of the abscess, the foot becomes completely distorted, and hectic fever is the unavoidable consequence.

The course of the disease always exceeds one and even more years, until the pus escapes outwardly. At all times life is in danger, even in the case of children; adults succumb almost always with scarce an exception.

A peculiar form of tarsal inflammation is a flat foot. Sometimes it affects small children, although it is only slightly developed at that age; it mostly shows itself after pubescence, most generally among males if they suddenly grow up in height. Every time after the foot is perseveringly used, violent pains are experienced in the joint, which becomes stiff after walking, with inability to stand upon the affected limb. Little by little the foot loses its arched shape, and the patients generally walk on the inner edge of the foot. The malformation of the foot may become very considerable, and may materially interfere with its use. Sometimes the trouble does not cease spontaneously until after the patient is thirty years old. This form of inflammation, which, under similar circumstances, may likewise occur at the knee, never results in suppuration. Treat only by a physician.

#### ALLOPATHIC TREATMENT.

The principles of treatment of inflammatory disease of the ankle joint are essentially the same as is laid down for the treatment of synovites in general, and of the hip and knee joints. Absolute rest is the first essential. Of all the plans of local applications, I believe heat to be the best. It can be applied by the hot wet pack, or by immersing the ankle in water as hot as can be borne, when the pain is relieved by repeated hot packs, or by the hot foot bath, the limb should be elevated, and kept in that position until there is no tenderness on pressure, and until the limb can hang down without causing pain. If there is effusion in the tissues about the joint, compression should be made by firmly bandaging a large sponge around the joint, which has been previously saturated with warm water and squeezed as dry as possible. (The foot, ankle, and leg, should be bandaged). The sponge and bandage about the joint should be kept wet with warm water. By the swelling of the sponge, and the shrinking of the

bandage, considerable compression is produced. Compression can be made more conveniently by the double India-rubber bag which is inflated with air. After a few days rubbing the joints with the hand will be useful.

In more advanced cases, extension should be made by the use of Sayre's splint for the ankle joint, and the patient permitted to go about on crutches while the surfaces of the joint are kept apart by the extension. The excessive secretion of fluid in the joint may be caused to be absorbed by pressure and rubbing. If pus is formed in the joint, or a thickened fluid which cannot be absorbed, as determined by the exploring-needle, or trocar,—it should be withdrawn by the aspirator, or incision as described in the treatment of the knee joint. Extension by means of Sayre's splint, should be continued.

When the disease has advanced to destruction of the tissues of the joint (cartilage or bone), the treatment is too complex to be described here. The reader is referred to some recent complete work on surgery, or diseases of the joints. If, however, the treatment described here is thoroughly carried out in the beginning of the disease, recovery will be reached without serious consequences.

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## CHAPTER XXVI.

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### ULCERS.

#### LYMPHATIC TUMORS. DISEASE OF THE CINGLOBATE GLANDS.

**Abscess**—By this term is meant a collection of purulent matter resulting from morbid action, contained in a sac or cyst of organized coagulating lymph furnished with absorbent and secreting vessels.

Abscesses are divided into acute and chronic. The acute variety is preceded by sensible inflammation in the affected part, which is soon followed by suppuration. The commencement of the suppurative process is known by a change in the description of pain, which becomes more obtuse and throbbing, by an increase of the swelling, and when matter is formed, by the perceptible fluctuation of the part, when the abscess is not too deeply seated; lastly, particularly in idiopathic (primary) cases, when the formation of pus is considerable, the fever which had attended the earlier stages is materially lessened, and irregular chills, or rigors, supervene, succeeded again by heat and increase of fever.

When the abscess is mature, the tumor becomes pointed, or presents a conical shape, generally near the center of the inflamed cutaneous surface; over this spot the skin assumes a reddish hue, becomes thin, and, ere long, gives way and allows the contents of the cavity to escape.

The signs of the formation, or existence of a chronic abscess, on the other hand, are, in the generality of cases, devoid of any apparent disor-



der, either local or constitutional, until it begins to approach the surface and form an external swelling. The secreted matter is unhealthy, thin, and contains substances resembling cards or flakes.

When the pus is let out (evacuated), and the air admitted into the cavity, inflammation of the cyst arises and is beneficial, if the cavity of the abscess is small, but if it be large great constitutional disturbance ensues, the cavity instead of contracting and filling up by healthy granulation goes on discharging copiously until, in the end, hectic fever is produced.

#### ALLOPATHIC TREATMENT.

Acute inflammation of the lymphatic vessels (angiolencitis) requires the applications of heat promptly and constantly. Flannels wrung out of hot water and the limb covered with them, and the whole well covered in to retain the heat, is a form of hot wet pack which is most serviceable. They should be renewed as often as they become cool. The hardened inflamed lines may be covered with Belladonna Ointment. Any wound or ulcer causing the inflammation is to receive its appropriate treatment.

Pain is to be relieved, if necessary, with Opium in grain doses.

Morphine in doses of a quarter of a grain, or Laudanum in doses of twenty-five drops, repeated just often enough to give relief.

Free incisions through the inflamed part relieve the tissues strangulated by the inflammation and evacuate the pus. Early incisions are very important. Pus has often formed in the subcutaneous tissue, which is not detected by fluctuation. Too great delay in making these incisions may be attended by serious consequences.

The patient must be nourished with milk, strong beef tea, and eggs. If much depression occurs Quinine and Brandy or Whisky should be freely administered. The former in doses of five to ten grains, from four to six hours apart, according to the urgency of the symptoms. The latter may be given according to the degree of urgency of the symptoms, in doses of a tablespoonful (half an ounce) to one or two ounces, from half an hour to four hours apart, but always short of symptoms of intoxication.

The bowels should be moved by Citrate of Magnesia or an injection of warm water.

Should the disease become chronic the strength of the patient should be supported by good food and tonics. Poor digestion may be improved by teaspoonful or dessertspoonful doses of Sheffer's Liquid Pepsin, and the blood enriched by the Tincture Muriate of Iron in doses of ten to twenty drops largely diluted in sweetened water, three times a day.

The best local application is the application of the Biniodide of Mercury Ointment in one-half to a full strength applied sufficiently often to produce slight irritation.

Inflammation of the lymphatic glands (adenitis) in the acute variety is to be treated precisely as directed for inflammation of the lymphatic vessels. As the inflammation is more localized, hot linseed poultices having the surface strongly impregnated with Laudanum may be used

with great advantage. The surface over the inflamed gland may be covered with Belladonna Ointment. Other hot applications are equally appropriate.

When the general health is poor or the patient scrofulous, such remedies as the Citrate of Iron and Quinine, in doses of two to five grains should be given. Iodide of Potassium with Iron is often an appropriate remedy. Take of Iodide of Potassium five drams, Pyrophosphate of Iron a dram, Peppermint water eight ounces. Mix.

*Dose:* A dessertspoonful three times a day. It can be sweetened or not, according to the taste of the patient.

The Compressed Syrup of the Phosphates or Hypophosphites in doses of a teaspoonful to a dessertspoonful three times a day is suitable. Cod Liver Oil is often required.

After the disappearance of the acute inflammation, if the glands remain, hard rubbing with Iodide of Mercury Ointment will generally produce absorption. This ointment may often be reduced one-half with lard.

#### HOMEOPATHIC TREATMENT.

In acute abscesses, apply poultices and warm, unmedicated fomentations, and forward the suppurative process. The lancet is never necessary, except when the pus, by its extensive diffusion or pressure, especially when deep-seated, is liable to injure important parts; or when, from its situation, there is reason to apprehend its discharge into any of the cavities of the body.

When it is necessary to make an opening with the lancet, the incision ought to be made at the lowest or most dependent point, where this can be safely and readily accomplished; but when this is impracticable, in consequence of the great thickness of the parts between the pus and the skin, the most prominent or pointed part should be selected.

When, on the other hand, this latter point happens to be at the upper part of the abscess, the lancet had better not be used at all, but trust rather to the use of remedies.

Hepar Sul., Silicea, Arsenicum, and Lachesis.

In chronic abscesses, it has usually been found most beneficial to make an outlet for the matter (pus) as early as possible, so as to prevent its large accumulation, and thereby avoid the consequent frightful constitutional disturbance so liable to occur in such cases from the extent of the inflammation after the bursting of the abscess, make the opening merely large enough to admit of the exit of the matter. When the collection of pus is very extensive, it frequently accumulates again after having been evacuated, hence it has been recommended to heal up the opening immediately, and to make a new one when necessary, but before the pus has accumulated in anything near like the first quantity evacuated.

## CHAPTER XXVII.

## DISEASES OF THE SKIN.

## ERYTHEMA.

## SIMPLE REDNESS OF THE SKIN.

Erythema occupies a middle rank between congestion and inflammation of the skin; it is easily confounded with a benign form of erysipélas.

Its causes are: Mechanical injuries of the skin; the influence of a high temperature, of various medicinal agents; continual moistening of one part of the skin by urine, liquid stool, perspiration, tears and even the constant use of moist compresses; constant irritation of the skin by rough clothes. In the case of children, erythema seems to be likewise caused by hearty and fat food. Erythema seldom occurs as a wide spread affection, to which the designation of "epidemic" might be applied. Chronic erythema breaks out chiefly in the face, and more especially on the nose; its causes sometimes seem to be purely local, and at other times constitutional.

Erythema is characterized by a more or less diffuse redness of the skin, not separated from the normal redness by sharply-drawn outlines, assuming a yellowish, not a white tint under the pressure of the finger, and continuing for some time and, finally terminating in desquamation (peeling off). These characteristics belong to all forms of erythema. Erythema caused by external irritants, most generally breaks out on the scrotum, at the anus, between the thighs, in the axillæ (arm pits), face, and in the deep integumentous folds of fleshy persons, or at the place where the irritating cause exerts its influence. After the cause ceases to act, the erythema generally disappears of itself in a few days. If the irritation continues, the skin may become detached (intertrigo), and ulcers may form, or the skin may even become gangrenous. Erythema arising from internal causes, is almost exclusively located on the dorsal surface of the hands and feet, where it is never absent, even if other parts are likewise affected. At first the place exhibits a redness, and in a few days darker-colored papules of various sizes spring up, which remain even for some time after the diffuse redness has disappeared; the affected spot likewise retains a yellowish tint for some time after. In particular circumstances subsequent crops of this eruption break out on its borders, by which means the affection runs a very protracted course. This form of erythema is generally attended with a little fever, and at the diseased spot a darting-burning pain is generally experienced. The former variety, on the contrary, has no fever as long as the erythema is of the simple kind, whereas the intertrigo of sensitive children may be attended with fever. The second variety, without any subsequent crops, lasts from one to two weeks.

In treating the first variety, all that it may be necessary for us to do, is to remove the exciting cause. In some individuals the disposition to erythema is so great, and it leads so easily to more serious consequences, that we are led to suspect behind the local irritation the existence of some

constitutional disposition. This is particularly the case with the inter-trigo or soreness of children. Since this soreness is often caused by improper diet, the first thing to be done is to regulate it with care; if the soreness continues in spite of this change, a few doses of *Mercurius vivus* or *solubilis* will cure the trouble very speedily.

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ERYSIPELAS.

Erysipelas proper is altogether a primary affection, the cause of which it is difficult to trace in every case. The disease occurs almost exclusively between the age of pubescence and that of sixty, and is of less frequent occurrence among old people than among children. Atmospheric influences are generally regarded as the cause of erysipelas, but this theory is not justified by the evidence of fact. All we know positively is that erysipelas often sets in as a sporadic disease, and that sometimes it breaks out in the form of a limited epidemic, which never assumes a very extensive range and has given rise to the erroneous view that erysipelas is a contagious disease. It is a characteristic feature of this disease that every new attack of erysipelas increases the patient's liability to other attacks, which only becomes extinct at an advanced age. The cause of successive attacks of erysipelas is very often to be found in violent emotions, gross errors in diet, and in colds, more especially in the action of severe cold upon a heated skin.

The origin of wandering erysipelas is involved in complete mystery; it is to be observed that it inclines to set in previous to the age of pubescence.

Traumatic erysipelas arises in consequence of injuries if suppuration ensues, or even at the start, soon after the infliction of the injury; or it accompanies suppurating inflammatory processes, such as gum-boils. It may be looked upon as an excess of reaction against the inflammation from which it proceeds. This circumstance likewise accounts for those cases of erysipelas that supervenes during typhus and other constitutional diseases as a malignant complication or as a terminal disease.

**SYMPTOMS AND COURSE.**—True, or the so-called exanthematic erysipelas really only breaks out in the face, whereas erysipelas on other parts of the body is, properly speaking, erythema. The appearance of the exanthem upon the skin is generally preceded for a few hours or even days by a preliminary stage consisting of a severe fever with marked gastric symptoms, with which symptoms of cerebral hyperæmia, and more especially a violent headache, sometimes become associated at an early period. During a first attack these precursory symptoms are scarcely ever absent; but they do not occur with a return of the disease. While the fever is on the increase, the face feels hot and tense, and sometimes rheumatic pains in the nape of the neck are complained of, a vivid redness breaks out at a certain circumscribed spot in the face, which spreads rapidly and causes a burning pain. In proportion as the redness becomes more intense, the swelling likewise increases and the skin assumes a glistening appearance. Erysipelas generally breaks out on one cheek, whence it spreads to the nose, the eyelids, forehead, ears, less frequently



to the lips, and scarcely ever to the chin. Within two or three days, and sometimes in thirty-six hours the erysipelas, reaches its acme at the spot where it first appeared, amid febrile symptoms which are sometimes exceedingly severe, attended with a foul-smelling catarrh of the mouth, vomiting, and most generally delirium; these symptoms, however, are not constant, whereas the headache and soporous stupefaction are exceedingly annoying. The face is now very much swollen, the features are disfigured to such an extent that they are no longer recognizable, the redness has a bluish and even brown-red tint, and vesicles of various sizes sometimes spring up upon the inflamed surface, which always indicate an intense degree of illness. The inflammation decreases very rapidly; the redness disappears after the existing vesicles had dried up previously, and had become transformed into thin and flat crusts, and very soon desquamation commences first in large patches, and afterwards in very small scales. But inasmuch as the disease never terminates with its first appearance, and usually spreads over the whole head, we find erysipelas in full bloom close to the original spot in process of healing, and find the redness gradually diffusing itself into this spot, whereas it forms a sharp contrast with the surrounding normal parts of the face. In this manner erysipelas gradually wanders over the whole face, even beyond the ears, invading a portion of the nape of the neck, and spreading over the forehead and the hairy scalp. In this latter case the patients suffer severe local pains, even after the fever abates. The intensity of the fever, as it first breaks out at the commencement of the disease, does not keep pace with its gradual progression. Whereas, at one spot, the inflammation runs its full course in five to six days, yet, on account of its progressive appearance in different localities, the whole course of the disease lasts from ten days to a fortnight. The process of desquamation may last much longer, and the most severely affected parts often exhibit for a long time a yellowish tint with signs of serous infiltration.

Deviations from this course are not unfrequent. The whole face may be covered so rapidly that it would seem as though the exanthem had broke out all over at once. These are cases of intense virulence, where one ear, however, commonly remains uninvaded. Moreover, the inflammation may communicate itself to the cerebral meningeæ; generally, however, this does not take place until the local process has reached its height. In such a case the redness very soon assumes a dingy and livid look; the skin becomes lax and wrinkled, a most violent delirium sets in, and coma and death speedily supervene. This course has been mistaken for a metastasis of erysipelas; whereas, in such a case, the same changes take place as in other similar cases, namely: that, with the appearance of a violent disorder, the previously-existing lesser disease abates and disappears. Erysipelas seldom becomes associated with diseases of other important organs. Attacks of erysipelas succeeding the first attack are very apt to show deviations from the normal course. These attacks are very seldom preceded by precursory symptoms, the less so the more frequently the attacks have occurred. Nor is the fever as severe, the swelling is less, and the spread of the disease over the face takes place more slowly. It not unfrequently happens that in subsequent attacks the patients are not obliged to lie down, and that their appetite remains the

same as in their normal condition. Subsequent attacks are more like erythema than erysipelas. The frequency of the attacks differs greatly in different individuals; sometimes there are several attacks in a few weeks and, after a short time, cease entirely; or months and even years intervene between the attacks; in such cases a spontaneous cessation is much less frequent.

Among the consequences of true erysipelas the following deserve particular mention: Swelling of the skin, especially that of the lids, nose and lips; the swelling is mostly puffy, the skin having a pale look, and being disposed to the formation of comedones; if the attacks are very frequent, the swelling may reach a considerable degree of thickness, and is very obstinate. Loss of the hair, which almost always falls out if the scalp had been intensely affected by the disease; in most cases the hair grows again, but there are exceptions to this rule. Severe catarrh of the ear, with obstinate hardness of hearing. Disposition to neuralgia.

Wandering erysipelas, or erysipelas ambulans or erraticum, attacks the face less frequently than the extremities. On one of the extremities an erysipelatous spot appears which heals exactly like the above described spots, only there is very little tension and pain, and the general organism is not so much involved. From this spot, the erysipelas spreads toward the trunk; the spot which is attacked next, being either in close contact with the first, or else all subsequent spots being more or less remote from each other.

Symptomatic erysipelas, as an accompaniment of inflammatory processes, is of no great importance, except when it covers a large extent of surface and depends upon septic causes. Generally it disappears of itself as soon as the cause that occasions it, is removed. If it is very intense, it may result in suppuration or gangrenous destruction of the skin. If the erysipelas sets in in the course of serious, constitutional diseases, with fever, it is always a bad omen. In such cases the redness is never very vivid—rather dingy, having a bluish tint; the swelling is not excessive and yet the disposition to form blisters is very great; these blisters do not always dry up, but often become transformed into badly-looking ulcers which are apt to become gangrenous. The fever accompanying this form of erysipelas, always increases to a high degree, but speedily assumes the character of an adynamic fever, the pulse becomes very small and frequent, the temperature increases considerably, the cerebral phenomena become very marked, and sopor and coma set in at an early period, and death sometimes takes place so rapidly that life becomes extinct already on the third day after the appearance of the inflammation.

Erysipelas of babes generally set in in the first week after the birth of the infant, very seldom after the first month. It almost always proceeds from the umbilicus, on which account it has been traced with great probability to the consequences of an improper management of this organ, more especially to a purulent inflammation of this organ which can easily be accounted for by bad management.—As a rule the erysipelas spreads from the umbilicus over the abdomen, the sexual organs, thighs, less frequently over the thorax and back. The redness is not very vivid, the swelling, on the contrary, is very considerable. The children are exceed-

ingly restless, feverish, and incline greatly to spasmodic affections and sopor.

### ALLOPATHIC TREATMENT.

A patient with erysipelas (erysipelatous fever) should be confined to bed in a well ventilated room. The diet should be light but consisting largely of milk. Cold drinks may be given as desired. If the bowels are constipated they should be moved by a saline cathartic, as the Citrate of Magnesia, aided, if necessary, by an injection of warm water. If the case be a mild one, and the fever not high, it is not generally necessary to resort to the use of drugs. In severe cases, the remedies most useful are Quinine and the Muriate Tincture of Iron. Quinine in these cases should be given in doses of five to ten or more grains every four hours. If a slight ringing in the ears is produced, the doses are sufficiently large. It is best given in powder enveloped in medicine wafers. The Tincture Muriate (Chloride) of Iron is very generally given by physicians in doses of from ten to thirty drops every four hours. It should be largely diluted with sweetened water, and may be given immediately after the Quinine. Beyond the support it gives to the system laboring under so debilitating a disease, the (direct) benefits from the Iron are questionable, but as it is beneficial in this way, it ought not to be omitted in any severe case.

Belladonna is especially antagonistic to this disease. The Extract may be given in doses of a quarter of a grain in pill, three or four hours apart, or the Tincture may be given in doses of five to ten drops at the same intervals. The Belladonna may be given with the Quinine.

In cases with high fever, the pulse strong, and there is no depression of the system, the Tincture of Aconite should be given in doses of half a drop to a drop every hour until an impression is made on the fever movement, and then continued two or three hours apart or just sufficiently often to continue the effect of moderating the fever. This remedy does not require the suspension of any of the others mentioned, but it should not be given when there is prostration.

There is no treatment which will limit the inflammation. The soothing effect of the Lead and Opium wash, is often extremely grateful to the patient. A half a dram of Sugar of Lead and ten grains of the Acetate of Morphine are dissolved in a quart of rain water. A soft muslin cloth is dipped in this solution and spread over the inflamed surface. The cloth should be kept wet. If this does not relieve the pain markedly, it is well to try anointing the surface well with Olive Oil. Two drams of the Fluid Extract of Belladonna to six drams of Oil will give the Oil a decided anodyne property. Glycerine with ten to twenty drops of Carbolic Acid to the ounce, is another good application.

Prostration or debility, occurring in the course of the disease, should be treated in the same manner as when it occurs with continued, or other fevers, with nutritious food, milk, beef, essence, raw eggs beaten up with sugar and water or milk. Nourishment should be given in these cases four hours apart. If the pulse should be very rapid and feeble brandy, or whisky in doses of one or two tablespoonsful may be given with the nourishment. The stimulant is beneficial, if the pulse becomes fuller,

slower, and more regular. Sago, Rice, or other farinaceous articles are not to be excluded, if agreeable to the patient.

### HOMŒOPATHIC TREATMENT.

ACONITE may be required at the onset, only in case there be *much fever, or hot, dry skin* at the commencement; or even during the course of the disease, if required.

*Dose:* Dissolve six pills in three tablepoonsful of water, and give a teaspoonful of the solution every three hours, until the pulse becomes diminished in force and frequency, and the skin moist.

BELLADONNA, when the redness expands in rays, and an acute shooting pain with heat and tingling, is experienced in the affected part, which is aggravated by movement. Erysipelas of the face, with burning heat, excessive swelling, so that the eyes are almost closed, violent headache, thirst, dry, hot skin, restlessness, disturbed sleep, delirium.

In such instances, Belladonna, is, generally, alone sufficient to effect a cure. There are cases, however, in which it will be found necessary to have recourse to Rhus-toxicodendron, in alternation with Belladonna, according to the particular symptoms, or group of symptoms present.

*Dose:* If singly, of a solution of eight pills to two tablepoonsful of water, give a teaspoonful every two hours, until change, when the intervals should be extended to six hours, until the symptoms are wholly overcome, or assume distinctive features indicative of another remedy. But in those cases, of occasional occurrence, in which the symptoms, being severe, are but little moderated, within three hours after the fourth dose of Belladonna, Rhus, a similar solution of each medicine, administered by tablepoonsful, at intervals of two hours, until change.

RHUS-TOXICODENDRON is to be preferred particularly when the disease manifests a tendency to extend itself to the brain and its membranes, and the symptoms closely resemble those which characterize Brain Fever. Rhus is especially suitable for the treatment of erysipelas, arising from *particular kinds of food*, operating upon certain *individual peculiarities of constitution* which *predispose* the patient to such attacks.

*Dose:* As directed for and under Bell.

ARSENICUM is required either after the previous administration of one or more of the foregoing medicines alone, or in *alternation* with Rhus when vesicles of a *blackish* hue, with a tendency to *degenerate into a gangrene*, present themselves; or, still more essentially, if great (and rapid) prostration of strength occurs.

*Dose:* In all respects, whether *singly* or in *alternation*, as directed under the head of Belladonna.

PULSATILLA is more especially indicated when the hue of the skin is *less* intense, or of a *bluish-red*, and the morbid spots frequently *disappear from one place to reappear in another* (fugitive erysipelas). It is further more appropriate when the disease affects the internal and external ear, especially in the *vesicular* variety of erysipelas, and after the employment of Rhus-toxicodendron.

*Dose:* Six pills in a teaspoonful of water, every three hours.

NUX-VOMICA is often of service in cases of erysipelas developed in the



*knee* or *foot*, and characterized by extremely painful, bright-red swelling. It is more especially advantageous in cases of *spurious erysipelas* occurring in irritable subjects, particularly females, and when mortification of the sub-cutaneous cellular tissue has ensued.

*Dose*: As for Pulsatilla.

#### ERYSIPELAS TERMINATING IN ULCERATION.

SULPHUR, ARSENICUM. See the article on "Ulcers."

#### SUSCEPTIBILITY TO ERYSIPELAS IN THE FACE.

BELLADONNA, RHUS. When this disease is repeatedly developed in the face, and there is, in fact, an habitual tendency to attacks of this nature, Belladonna and Rhus (in particular), either singly, alternately, or successively, according to circumstances, are frequently capable of permanently removing the complaint, and of obviating the return of attacks.

*Dose*: If *singly*, of either remedy, give six pills, night and morning, for a week (as soon as the acute symptoms of an attack have been subdued); then pause four days, after which the course may be repeated, as before, and so on from time to time. If in *alternation*—give first the one (as just directed), and then after an interval of twenty-four hours or longer, proceed with the other, in like manner, and so on, occasionally, until the predisposition seems conquered.

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### NETTLE-RASH.

#### HIVES.

#### *Urticaria.*

DIAGNOSIS.—Spots or wheals, flat or prominent, and of a dull white color, like the sting of a nettle, or redder than the surrounding skin, generally encircled with a rosy areola, disappearing in warmth, and reappearing when exposed to cold, evolved suddenly, and continually changing their situation.

This eruption is brought to the surface by various causes, not unfrequently arising from indigestion, caused by the use of improper articles of food. Before the eruption discloses itself, the patient is affected with restlessness, languor, oppression, and want of appetite, derangement of the digestive functions, and fever. When the eruption breaks out, the above symptoms become relieved, but considerable suffering arises from heat and itching, sometimes accompanied with swelling of the parts affected. This disease, in almost all cases arising from a constitutional cause, requires for its total eradication a regular course of treatment.

#### ALLOPATHIC TREATMENT.

Acute Urticaria depending on irritation of the stomach, especially if caused by some food which has been eaten, an emetic of twenty grains of Ipecacuanha in half a glass of water should be given. After the vomit a simple laxative should be given. A Seidlitz Powder or Citrate of Mag-

nesia, in a dose of a tablespoonful in half a glass of water and drunk during effervescence.

The diet should be simple for several days consisting of rare lean beef or mutton, milk, eggs, bread, and farinaceous food. Bismuth in doses of ten or fifteen grains should be given (in milk) before each meal.

Alkaline drinks should be taken to overcome acidity or irritation of the bowel. Ten to twenty grains of the Citrate of Potash in lemonade every four hours will be sufficient.

In the chronic disease the cause must be carefully sought out and removed. Articles of food which are found to disagree must be avoided. Sometimes it is necessary to omit one article after another until the offending one is found. A pure milk diet is sometimes necessary. Bismuth and Citrate of Potash recommended above are often useful. In many instances the Solution of Pepsin and Bismuth (Sheffer's formula) in doses of a dessertspoonful before eating, should be tried. If the patient is rheumatic or gouty Wine of Colchium should be tried in doses of a teaspoonful one or more times a day, to produce a slight action on the bowels. When causes in the stomach or bowels are excluded Fowler's Solution in doses of three to five drops after meals should be tried; the remedy should be omitted for a time if it causes puffy lids, watery eyes, or abdominal pains.

If the disease occurs periodically Quinine should be given in doses of five grains three to six times a day.

The presence of fleas and insects as causes should be sought for. A solution of Corrosive Sublimate in half a pint of water is a useful application where the disease depends on the bite of insects.

Bathing with vinegar and water is often beneficial or sponging with a tablespoonful of Dilute Nitric Acid in a quart of water.

### HOMŒOPATHIC TREATMENT.

In acute cases, the remedies found most useful are *Dulcamara*, *Aconite*, *Nux-vomica*, *Pulsatilla*, *Antimonium crudum*, *Belladonna*, *Hepar sulphuris*, *Rhus-toxicodendron*, and *Bryonia*.

**DULCAMARA**, when the exciting cause has been cold or damp, when the affection occurs in wet weather, or when we find considerable fever with bitter taste in the mouth, foul tongue, diarrhœa, pains in the limbs, and extreme itching, with a burning sensation after scratching.

**ACONITE**, when the febrile symptoms are more intense, the pulse high, the skin hot and dry, and great restlessness and anxiety are present.

**NUX VOMICA**, when there is considerable gastric derangement, with constipation, more especially when arising from wine, stimulants, or indigestible substances; it may, if necessary, follow *Aconite* in eight or twelve hours after the febrile symptoms are somewhat modified.

**PULSATILLA** deserves a preference, under similar circumstances, when the bowels are relaxed, and the patient is of a quiet disposition and lymphatic temperament, and the attack has apparently been excited by indigestible food.

ANTIMONIUM CRUDUM may follow Pulsatilla, should the latter have failed to relieve the affection.

BELLADONNA is indicated when the affection is attended with a severe throbbing headache, with redness of the face.

HEPAR SULPHURIS has frequently been found useful in urticaria accompanied by cold in the head, and particularly when the coryza was confined to one nostril.

RHUS-TOXICODENDRON is one of the most useful remedies in a great majority of cases of this eruption, and especially when the affection has apparently arisen from some idiosyncrasy of constitution, in which the eruption has been thrown out by the use of some particular article of food.

PRESCRIPTION.—In ordinary cases, we may prescribe 6-12 globules of the sixth dilution in six dessertspoonsful of water, and order one to be taken morning and evening, except in the case of *Aconite*, which may be more frequently repeated, when the febrile symptoms seem to demand it.

In this, as in every other cutaneous eruption, great care ought to be taken against driving it inward, by external application or lotions; a sudden retropulsion, as noted under SCARLATINA and SMALL-POX, being frequently attended with fatal consequences. When, however, from improper treatment, we have reason to dread this having taken place, we may generally succeed in re-establishing the eruption, and thereby averting any dangerous consequences, by the employment of *Bryonia* in repeated doses. Should, however, marked cerebral symptoms declare themselves, the complaint should be treated as described under SCARLATINA.

URTICA URENS has been found useful in some cases; and in those of a chronic or extremely obstinate character, *Calcareæ*, *Lycopodium*, *Sulphur*, *Carb. veg.*, *Causticum*, *Acid. nitric.*, *Conium*, *Natr. mur.*, etc.; the last two, particularly, when the eruption is liable to reappear after violent exercise or exertion of any kind; *Calcareæ*, when exposure to cold fresh air produces it; and *Acid. nitricum* when it arises from the patient going into the open air, after having kept within doors for a day or two.

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## DANDRUFF.

### PITYRIASIS.

Pityriasis is a throwing off of the skin, either in thin scales, or in larger patches; it may or may not be accompanied by some other affection of the skin, and the skin thrown off may, to all appearance, be perfectly sound; or else the process may be accompanied by trifling local or more extensive symptoms of thickening of the skin. According as the skin is unchanged or looks red under the scales, the affection is designated as pityriasis simplex or rubra (red).

The causes of this affection are very obscure; in some cases the disease can be traced, with some certainty, to a derangement of the functions of the liver and of the female sexual organs.

Pityriasis rubra, when spread over more extensive portions of the

skin, not unfrequently sets in with slight febrile motions which may break out at every renewed appearance of the exanthem. On portions of the skin, which itch and burn very fiercely, large red spots of indefinite and irregular shapes make their appearance. Accompanied by a peculiar feeling of tension, the skin on these spots very soon begins to exfoliate. The eruption first manifests itself on the trunk, and only invades the face if exceedingly severe. The almost inevitable itching may cause a moisture to ooze from the otherwise dry spots on the skin. This itching which is absolutely agonizing, very commonly interferes with the sleep. The affection is very obstinate, but at the same time one of the rarer forms of cutaneous diseases.

Pityriasis, confined to isolated spots, is much less frequently of the character *rubra* than a general pityriasis; it is most commonly met with on the hairy scalp, in the palms of the hands, on the soles of the feet and in the face. The itching is much less distressing, but is still very violent on the hairy scalp. By scratching the skin until it tears, a moisture is secreted from the irritated spot, resulting in the formation of superficial scurfs and crusts and agglutination of the hair.

In treating a case of general pityriasis, we must not forget that we are dealing with a very chronic affection which never promises rapid success, and where it would be consequently improper to make a frequent change of medicines, or to repeat the dose too often. The most important remedies are Graphites and Arsenicum, with which it is most likely that a cure can best be effected.

The attack may be modified in any and every degree, from that just described to that resulting only in the throwing off of small dry scales from the hairy scalp. The treatment is one of the most difficult known to the profession of medicine only on account of its tediousness and the absolute carelessness of patients who more than half the time neglect to use the means which *would* cure if used as directed.

SEPIA is particularly indicated in the case of females, if the spots break out in consequence of menstrual irregularities, or at definite periods of the year.

#### ALLOPATHIC TREATMENT.

For dandruff there is no more effectual application than keeping the scalp clean with a strong solution of Borax. Frequent daily (or often enough to keep off the scales) shampooing, with a mixture of equal parts of Soft Soap (*Sapo Veridis*, made of Olive Oil and Caustic Potash) and Alcohol is most useful. Washing the head with weak alkaline solutions is also useful. If the scales are thick the use of a five per cent solution of Oleate of Mercury is very beneficial. An ointment of fifteen grains of Red Oxide of Mercury or thirty grains of the White Precipitate with an ounce of lard and half an ounce of Sweet Oil is beneficial.

After each washing of the head the hair should be well oiled to prevent the skin becoming too dry. Olive or Almond Oil, scented to suit, are appropriate for this.

In old cases with no derangement of the stomach or bowels, three drops of Fowler's Solution should be given after each meal.



Derangement of digestion or other indisposition demands suitable treatment.

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## PSORIASIS.

### SCALEY TETTER.

This is pre-eminently an affection of the male sex; in the case of females it is never attended with sexual disorders. It attacks individuals between the seventh and fiftieth year, and occurs most frequently in the cold season. It cannot be traced to constitutional derangements, since persons who are afflicted with this disease, otherwise enjoy the most perfect health. With the appearance of some constitutional disease, the psoriasis disappears at once, but returns again as soon as the disease is removed.

Psoriasis begins thus: at various, more or less numerous scattered spots, the detached epidermis (skin) forms a small, white rising (psoriasis punctata). These spots gradually spread until they reach the size of drops (psoriasis guttata); on removing the scales, we find the skin underneath slightly red and bleeding. In proportion as the circumference continues to expand, the original spot becomes cleansed of its scales, and a ring forms surrounding a healthy-looking skin (psoriasis annularis); in the further progress of the exanthem, this ring opens, losing its roundness (psoriasis gyrata) and finally disappearing altogether. All these stages, or most of them, coexist side by side in almost every case of this disease. Psoriasis is not attended with itching, or at most only at the commencement, but in no case if it has become an inveterate disease. It may remain stationary, though breaking out in new places, or it may intermit in its manifestations for months and even years.

Among external remedies which are never hurtful and usually efficient, is the vapor bath, accompanied by frictions with castile soap, or brown soap; cold bathing is of decided benefit, but its effects are not at once perceptible.

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## SYCOSIS MENTAGRA.

### BARBER'S ITCH.

This is exclusively a disease of the male sex. If persons who do not shave are attacked by it, which is a very rare occurrence, its causes are very obscure. In cases where the beard is shaved, the eruption may be caused by bad or irritating soap or by a dull razor, but is almost always the result of shaving by a careless and uncleanly barber, who does not properly clean and scald his razor, and, although generally so frightfully obstinate, yet may heal spontaneously even without much loss of time; all that need be done is to omit shaving the affected parts. Dirt and snuff likewise seem to occasion sycosis (barber itch).

The disease generally sets in, like herpes labialis (cold blisters), with a sensation of burning, heat and tension; most commonly we first notice on

the chin a small cluster of isolated, red knobs or pimples (tubercles) of a pretty large size, each of which is perforated by a hair. Some of these tubercles in a few days change to pustules, break and form dark crusts, without the infiltration which forms the little tubercle, disappearing on that account. In spite of all care, and generally in consequence of continued irritation, the number of tubercles increases slowly but uninterruptedly, the former ones growing larger; the skin upon which they are seated, becomes more and more infiltrated; after breaking, the pustules change to ulcers. The patients do not complain of much pain, but their ugly appearance fills them with anxiety. The disease is extremely obstinate and may last for years. It is true that it not unfrequently abates in severity, and at times even disappears altogether; but it breaks out again with renewed fierceness, and in such a case in more than one spot simultaneously. Its first appearance is almost always on the chin; it is here that the disorder exists most commonly in its fiercest intensity, but it likewise invades every other bearded portion of the face, and in severe cases even the eyebrows.

Fifteen grains of Carbolic Acid to one ounce of Glycerine, applied in small quantity after pulling the hair out of the center of each tubercle, every day twice after a thorough washing with good soap, is a very certain cure.

#### ALLOPATHIC TREATMENT.

Removal of the diseased hair by extraction with a pair of forceps, a few at a time, is the first requisite after subduing the inflammation with warm poultices. Then the application of an ointment of Carbonate of Copper two drams to an ounce of lard will complete the cure. The Oleate of Mercury: or a solution of Corrosive Sublimate fifteen grains with Muriate of Ammonia thirty grains in eight ounces of Distilled Water: or a dram of Sulphate of Copper and four drams of Sulphate of Zinc dissolved in a pint of water, are effectual applications.

The general health and state of the bowels require attention.

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#### ACNA ROSACEA, GUTTA ROSACEA.

##### COPPER-NOSE, BOTTLE-NOSE.

Acna Rosacea is an exanthem consisting of tubercles with some disposition to suppurate, suppurating tubercles; and, moreover, of continual venous congestion.

It almost always commences at the tip of the nose, whence it spreads over the nose and over both cheeks, finally over the forehead and rest of the face. First, we notice a spot of small extent, painless, and distinctly traversed by dilated cutaneous veins. Upon this base single tubercles start up, which sometimes suppurate at an early period, but likewise spread in size after the pus is discharged. New tubercles keep constantly forming, new spots keep constantly breaking out, the skin becomes more and more thickened, the veins become more and more varicose, the isolated little blotches change to large tubercles, cracks and deep rhagades, and even ulcers make their appearance, and the face looks very much disfigured in conse-

quence of this extreme development of nasal exanthem. At first the affection has remissions, but the dark redness never disappears entirely; at a later period the disorder keeps growing all the time.

Abuse of wine and spirits is the cause of the disease in by far the larger number of cases; but it likewise breaks out on individuals of very moderate habits, as drinkers. Among women the disease is of rare occurrence, and only among drinkers of spirits as a rule, and associated with menstrual anomalies. The disease is not often seen previous to the twenty-fifth year; its most frequent occurrence is after the fortieth. Overheating the system and immoderate drinking are very apt to cause a renewed outbreak of the disease. It is exceedingly obstinate, and, in its higher grades, is considered incurable.

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### HERPES.

#### TETTER.

All forms of herpes (and they are many), are characterized by the formation of little blisters, clusters of which are seated upon and inflamed, red epidermis; the vesicles of one cluster breaking out simultaneously and running an acute course.

#### HERPES FACIALIS, FACIAL HERPES.

This form of herpes accompanies a large number of fevers and chronic diseases without exerting any specially modifying influences over their course; except in pneumonia where this form of herpes is said to constitute a decidedly favorable omen. As an independent exanthem it seems to manifest itself when indicating the commencement of a catarrhal affection, provided the catarrhal irritation is not very intense. A first appearance predisposes most decidedly to relapses.

Herpes facialis (cold blisters), most generally breaks out on the lips less frequently on the cheeks, forehead, ears, eyelids. A tension, burning, and a marked sensation of swelling are experienced at a certain infiltrated spot, where the blisters start up amid slight febrile motions and an unusual feeling of lassitude. In the face they are always of a tolerably large size, but there are not many of them clustered together, they incline to run into one another; the skin of the spot where they are located does not show a very vivid redness; sometimes they are pitted or cleft. They contain a clear liquid which soon becomes dim and changes to a rather dark scurf that soon falls off, leaving for some time a red, somewhat infiltrated spot; burning pains likewise remain for some time. A few doses of *Rhus Tox.* will cure this form.

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### SHINGLES.

#### HERPES ZOSTER, ZONA.

This form is characterized by the development of clusters of blisters (vesicles), of which there are generally several, along the tract of one or more spinal nerves, assuming on the trunk the shape of a zone or belt, but on the extremities breaking out in a more irregular form.

Shingles commence almost without exception with rheumatic pains

in the parts where it is to break out, and is often attended with great lassitude and fever. The preliminary pains are not unfrequently like inflammatory pains. With violent and painful burning, an efflorescence breaks out, after which pimples without pus arise, next, clusters of vesicles (blisters) with tendency to run into one another. These vesicles remain out for four to six days, after which they change to flat scurfs. But as a new cluster may arise after the first, and these successive crops may continue even after the first vesicles are entirely healed, the whole process may last even three weeks. It is very seldom the case that scratching or the friction of the clothes will cause a superficial ulceration. There may be no pain during the continuance, except the slight burning attending the successive breaking out of new crops of vesicles; but the greatest distress to the patient is the burning itching which is especially severe in bed. After the falling off of the crusts all pain is gone, or the peculiar itching may perhaps continue for some time, or finally—and this is not by any means a rare occurrence—intercostal neuralgia of a very obstinate type may set in, apparently the more readily the less scantily the herpes was out on the skin.

#### HOMŒOPATHIC TREATMENT.

MEZEREUM is to be relied on, given four doses daily, six pills at a dose.

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#### RINGWORM.

##### HERPES IRIS AND CIRCINNATUS.

Herpes iris consists of a larger blister which is not unfrequently filled with a blood-tinged liquid, and is surrounded by a wreath of smaller vesicles, around whose external border another and larger wreath may form. The course is the same as that of other herpetic vesicles. The affection first appears on the dorsa of the feet or hands, spreading on the extensor-surfaces from below upwards, and the new clusters of vesicles appearing either in the same relative position as the vesicles of herpes generally, or else again assuming the form of herpes iris. This form of herpes most frequently occurs among women and children.

Herpes circinnatus which comes out in the same manner as herpes iris, is distinguished from the latter by the circumstance that the central blister is missing, and that only the wreath of vesicles is present.

#### ALLOPATHIC TREATMENT.

In the treatment of "ringworm" (herpes circinnatus) simple measures generally succeed at once, as the application of a strong solution of Nitrate of Silver, from ten grains to a dram to the ounce; an ointment of ten grains Acetate of Copper to the ounce of Lard; a five-percent solution of Oleate of Mercury in Oleic Acid containing a dram of Ether to the ounce; a solution of Corrosive Sublimate two grains and upward to the ounce of water, or the Sulphur Ointment with from ten to twenty grains of Corrosive Sublimate to the ounce; or Tincture of Iodine, will suffice. These applications destroy the parasitic plant which causes the disease.

In ringworm of the scalp (*trinea tonsuraus*) the first indication, as in



ring-worm or scald-head, is the same, to destroy the parasitic plant. This is best done by applying a blistering fluid (Blistering Collodeon) remove the loosened epidermis, and then apply an ointment made by mixing twenty grains of Corrosive Sublimate, or forty grains of White Precipitate with an ounce of Sulphur Ointment, or some of the mixtures given for ring-worm. The scalp should be carefully cleansed every day to remove any loosened scarf-skin which may interfere with the ointment (or other application reaching the parasite), and the application made twice a day.

Scrofulous or poorly nourished children will need tonic treatment, as a teaspoonful or more of Cod Liver Oil and a teaspoonful of the Compound Syrup of Hypo-Phosphites daily.

It is claimed that the continuous use of Soft Soap (*Sapo Veridis*), made with Olive Oil and Potash, will cure the disease in two weeks.

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## ECZEMA.

### SALT RHEUM.

The causes of eczema are either external irritants acting directly upon the skin, or else substances that affect this organ through the general circulation into which they had been absorbed, or finally constitutional influences. Heat, for instance, causes the so-called baker's itch; and heat, intense cold, salt-baths, mercurial frictions, Croton-oil, etc., a number of medicinal agents taken internally, fat food or food giving rise to an unusual deposition of fat, scrofulosis, affections of the female organs of generation, varicose veins, and in general all kinds of stoppage in the venous system, and a number of other similar circumstances and influences uniformly occasion eczema. Among the direct cutaneous irritants we distinguish: neglect in attending to the skin, vermin, friction by the clothes, continued rubbing of a part, for instance between the thighs when riding on horseback, and by continued walking.

A good example of eczema is obtained by rubbing Croton Oil upon the skin. Upon a red surface a number of vesicles (blisters) or pimples shoot up which, if carefully guarded, heal in a few days leaving the affected portion of the skin injected. If the vesicles are not protected, if they are scratched or rubbed against by the clothes, they break, and crusts form, beneath which, if the irritation continues, the exudation continues likewise, or else the exudation may be so copious that no crusts can form, in which case the affected part always looks red and moist. If the irritation continues, the eczema spreads to the adjoining parts; scratching even communicates it to remote parts; besides the vesicles, pustules form likewise.

Eczema of the legs (*salt-rheum*) really depends almost exclusively upon varicose veins, more especially upon dilation of the small cutaneous veins, whereas the larger vessels may continue in a perfectly normal condition. This eczema is extremely obstinate, itches most horribly, generally exacerbates in the spring and fall, and is a species of *eczema rubrum*

with occasional formation of pustules and an infiltration of the skin that makes it look very badly.

Eczema seldom runs an acute course; the extremely acute form of "eczema universale" is very rare; on the other hand, it not unfrequently commences as an acute exanthem, with slight fever, but very soon assumes a chronic character. All the different forms of eczema itch more or less; scratching, which it is impossible to avoid, is a main cause of the onward spread and the protracted course of the disease. Every kind of eczema may heal and does heal spontaneously, provided the chief requisite towards a cure, namely, rest in a lying position and absolute cleanliness is attended to. Eczema of the leg and scrotum give the least hope of a cure.

### ALLOPATHIC TREATMENT.

In an acute attack of Eczema in a person of robust constitution, the bowels ought to be briskly moved. Ten grains of Calomel, followed after six hours, by a dessert to a tablespoonful of Epsom Salts, or Citrate of Magnesia, or a double Seidlitz Powder. This should be followed by ten to fifteen grain doses of Citrate of Potash or Cream of Tartar in Lemonade, a sixth of a grain of Tartar Emetic should be added to each dose, and given from two to four hours apart.

If the patient is not strong, Calomel should not be given, but a saline laxative of a dessert to a tablespoonful of Epsom Salts or Citrate of Magnesia, or a Seidlitz Powder. This should be followed by Cream of Tartar in doses of ten to twenty grains, in Lemonade, from two to four hours apart.

The eruption should be poulticed with flaxseed meal or slippery elm spread thin between very thin layers of muslin or soft linen dipped in warm water, spread over the eruption, and covered with oiled muslin.

When there is much burning, the following powder, sprinkled on the eruption, before the poultice is put on, is useful: Take Camphor half a dram, Ether a sufficient quantity to powder the Camphor, four drams each of Oxide of Zinc and Starch. Mix.

Old chronic cases of this disease are known as Salt Rheum. The crusts should be softened by poulticing with Flaxseed meal or Powdered Slippery Elm, until they can be easily removed.

After the crusts are removed and the surface carefully dried, the Benzoated Oxide of Zinc Ointment should be applied constantly, and all irritating applications cease, though an occasional cleansing may be necessary. If the secretion does not disappear, or greatly diminish, one of the best applications which can be made is a dram of Tannin dissolved in an ounce of Glycerine. The ointment may be used again a short time after the Tannin and Glycerine are used.

Tonics will be needed, and the principal ones are Quinine, Iron, Arsenic and Cod Liver Oil. The Cod Liver Oil may be given in doses of a teaspoonful three or four times a day. The Citrate of Iron and Quinine in two to five grain doses, three times a day; it should be dissolved in Syrup of Ginger or Orange Flower Water. These are particularly indicated if the patient is in poor health, with impoverished blood. All chronic cases

are benefited by Arsenic. It should be given as Fowler's Solution, in doses of three to six drops, after meals. It can be combined with the Citrate of Iron and Quinine, as in the following formula: Take of Citrate of Iron and Quinine a dram and a half, Syrup of Ginger or Orange Flower Water four ounces, add Fowler's Solution a dram and a half.

*Dose:* A teaspoonful, three times a day.

## BOIL.

### FERUNCULUS—ABSCESSUS NUCLEATUS.

**DIAGNOSIS.**—Round or rather cone-shaped hard elevations of different sizes slowly inflaming and suppurating, discharging matter generally at first, tinged with blood, but still retaining a portion of morbidly-altered cellular tissue, which may form the nucleus of other elevations after those which appeared first have healed.

These sores yield readily to internal treatment and without pain, while the treatment with drawing salves is often distressingly painful. No external application need be used, but as soon as the parts begin to look red and cause pain we give *Arnica* every two to four hours. If the swelling still increases and a small spot of pus has already made its appearance, give *Arnica* and *Hepar Sul.* in alternation every two to four hours. If the tumor has been allowed to go on so long that pus has formed deep in, the sore has become very painful and still does not discharge, but fluctuates on sudden pressure, an incision may be made with a lancet, after which the pain will cease and the pus run out.

Poultices of bread and milk or kindred substances should not be applied too soon, lest the natural development of the tumor should be interfered with. This is the reason why many persons are afflicted with fresh boils, every six to eight weeks; the acrid matter is not permitted to be fully expelled from the organism.

Pork and fat food must be avoided by those who are the subjects of such sores. A single small dose of *Sulphur* allowed to act for months will entirely eradicate the tendency to boils.

### ALLOPATHIC TREATMENT.

The maturity of a boil may be hastened by poulticing with Flaxseed meal, or powdered Slippery Elm, when it may be allowed to break and run out into a poultice. Water dressings covered with oiled muslin may be used instead.

Boils which contain pus, and do not come to a head, should be opened. Boils occurring singly, or in crops which do not soon suppurate, but remain hard may be made to disappear by brushing them over with Tincture of Iodine, sometimes crops of them may be suppressed by early resorting to this.

When boils occur in successive crops, it is probable, poultices will induce their farther development, and should not be used if this appears to be the case. But if they are painful a poultice made, having incorporated in it stramonium (Jamestown weed), or Tobacco, or that has Laudanum, or Fluid Extract of *Belladonna* poured upon its surface. A plegget of

cotton saturated with equal parts of Carbolic and Glycerine with or without one half part of Fluid Extract of Belladonna placed over a group of boils is often effectual in relieving the pain. Soap plaster is a good application for these groups of boils, but after they open Rosin plaster should be used. The diet should be plain and nutritious.

Occasionally a boil can be aborted by touching the inflamed pimple with the Acid Nitrate of Mercury, or the solid stick of Nitrate of Silver.

The system of persons having boils requires supporting. For this purpose, Quinine and Iron should be given. The former may be given in Sugar coated pills (Warner's), in doses of from two to six grains three times a day. When ringing of the ears is produced, the dose should be decreased. The latter may be given with Chlorate of Potash. Dissolve four drams of Chlorate of Potash in four ounces of boiling water, add three and a half ounces of Simple Syrup, and half an ounce of Tincture of the Chloride of Iron. Dose a tablespoonful three times a day. If the case does not improve, Iron and Arsenic may be given instead of Iron and Chlorate of Potash. Take of the Citrate of Iron and Ammonia two drams, Fowler's Solution eighty minims, Simple Syrup one ounce, Anise water sufficient to make eight ounces. Dose a dessertspoonful three times a day. A tenth of a grain of the Sulphide of Calcium given hourly, is claimed to prevent the recurring crops of boils. Sometimes a trip into the country is necessary for their cure.

#### CARBUNCLE.

*Anthrax. Ferunculus Malignans. Pustula Nigra.*

DIAGNOSIS.—A livid, bluish, or black spot upon an extended surface extremely painful, readily running to gangrene, and proving fatal, occasionally, from the extension of mortification. The disease is attended by headache, thirst, foul tongue, sickness, loathing of food, languor, jactitation (trembling) and sleeplessness.

#### ALLOPATHIC TREATMENT.

Carbuncles should be early cut through to their base by a crucial (+) incision and dressed with a flaxseed meal poultice or the mixture of Carbolic Acid one part, and Glycerine two parts. After the slough comes away the ulcer may be washed with a solution of Carbolic Acid one dram in five ounces of water, or oiled with Olive Oil or Glycerine containing twelve drops of Carbolic Acid to the ounce.

The internal treatment is the same as recommended for boils. The diet should be plain and nutritious, as lean meat, milk, eggs, and simple starchy articles of food.

#### HOMOEOPATHIC TREATMENT.

The best remedies in this affection are in the order of their names: Ars., Silicea, Mercurius.

ARSENICUM is, by all means, the most efficacious remedy, and the more especially so if gangrene is approaching or has appeared.

SILICEA. When administered, in the beginning, in simple carbuncle is frequently found sufficient to effect a perfect cure.



MERCURIUS. Pain worse at night, attended with copious sweats which give no relief. If the strength is greatly reduced by the loss of blood, etc., China, three doses a day for a week, will greatly assist nature.

### FAVUS.

#### HONEY-COMB TETTER, SCALD-HEAD.

This cutaneous affection is characterized by the accumulation of multitudes of fungi around the roots of the hairs, hence their exclusive appearance on the hairy portions of the skin.

Favus is a disease of the lower classes. It only attacks individuals who pay no sort of attention to cleanliness. In other respects such individuals may either enjoy the most perfect health, or else be of sickly and cachectic constitutions; favus may attack either sex. This exanthem can be transferred to other persons by hats, caps and other head-gear, likewise by sleeping in the same bed; it has likewise been transmitted purposely from one individual to another.

A single favus-efflorescence has its origin in the orifice of a small gland in the form of a small, imbedded, not painful papule, which is perforated by the hair and keeps constantly increasing in breadth and height, until the characteristic crust finally arises from it. This crust has the shape of a dish, with a rounded central depression and round elevated borders; it has a yellowish or gray tint, without any exudation underneath, and has a peculiar odor.

The consequences of favus are: Partial atrophy of the skin in consequence of the crusts being imbedded in it; eczema occasioned by the scratching; destruction of the hair on the affected parts; on the other hand, this disorder has no influence upon the general state of the constitution. The disease runs a very chronic course yet spontaneous cures occur, although very tardily and not without corresponding modifications in the hygienic circumstances of the patients.

According to what we have stated concerning the history of the disease, we deem an internal treatment of it useless and ineffectual. This can only be cured by removing the crusts in which the fungi are imbedded, and by preventing their return. The surest means of accomplishing this result, is care and cleanliness. The removal of the crusts is secured by softening them with oil, and afterwards removing them together with the perforating hair. This is a very tedious, but sure undertaking. Every sickly-looking hair has to be pulled out singly, for the reason that the disease has already invaded the soil in which it grows.

Dr. Hole of Chicago says this eruption is treated with success in some cases by means of *Iris versicolor*; a cerate is applied to the scalp, and a few drops of the tincture, even as many as twenty, in half a tumblerful of water given internally, in teaspoonful doses, three or four times a day.

#### ALLOPATHIC TREATMENT.

In this disease (Scald-head—Favus) as in ringworm and tine-a-tonsursans and barber's itch, the object of treatment is to destroy the parasitic plant occasioning the disease. The crusts may be got rid of by poultices

or preferably by constantly applying a mixture of equal parts of Sulphurous Acid and Glycerine. A piece of lint may be saturated with the mixture, laid over the part and then covered with oiled muslin. This same mixture may complete the cure, or a solution of Corrosive Sublimate five to ten grains to the ounce may be used.

The hair must be pulled out in the affected part and for a little space around it. The cure is now easy, but without which is almost impossible.

The food should be good. Two to five grains of the Soluble Citrate of Iron and Quinine may be given three times a day. After the cure is complete the occasional application of the Oleate of Mercury should be made, or a hair pomade used, with which has been mixed five grains of Corrosive Sublimate to the ounce: Take of Corrosive Sublimate five grains, Simple Ointment an ounce, Otter of Roses three or four drops. Mix and use for a hair pomade.

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## ITCH.

### SCABIES.

This contagious, inflammatory affection of the skin, is characterized by an eruption of pointed vesicles, transparent at the summit, and filled with a viscid and serous fluid, in which lives a very small insect. These are subsequently mixed with, or terminate in, pustules. With the exception of the face, they appear in every part of the body, but much more frequently and abundantly about the wrists, between the fingers, and at the bend of the joints, etc., and are accompanied by incessant and almost insuperable itching, without fever. There are several varieties of the disorder, but it is often very difficult to distinguish their characteristic differences.

### EXTERNAL TREATMENT.

The local application of Sulphur, either in the form of lotion or ointment, should be used.

The above method of treatment, combined with the free and frequent use of *soap and water*, undoubtedly suffices, in mild and recent cases, to remove this troublesome affection; but as in those of longer standing it may be found inadequate to destroy the mites which have now been clearly demonstrated to be the cause (not the result) of the disease, the following course of treatment should be adopted, and will usually succeed in accomplishing a speedy and permanent cure: Let the patient be placed in a hot bath, and the hands, wrists, and other affected parts be well rubbed with fine sand (or a sand ball), for the purpose of tearing open the passages and cells where the vermin have burrowed and located themselves. In persons of tender or delicate skins, brisk rubbing with a coarse towel, after the bath, may be sufficient to effect the required object; but the use of fine sand, or pounded chalk, is to be preferred. When the patient has been dried, all the *affected parts* should then be well rubbed with a lotion made of Olive or Almond Oil and a few drops of some essential oil, thus:

To two tablepoonsful of *Almond-oil* add twenty drops of *Oil of Sassafras*.

The rubbing in, and, if needful, in inveterate cases, the hot bath and frictions, should be repeated every three days for a fortnight or so, or until the cure is complete. When, as is sometimes the case in certain habits, boils are associated with itch, and continue to break out for some time after the removal of the latter, the remedies prescribed in the article on BOILS should be had recourse to.

The sudden suppression, by external means, of some of the eruptions which have been mistaken for or occasionally follow, or have been developed during the existence of *inveterate* itch, has, undoubtedly, as not unfrequently happens in other chronic eruptions, been repeatedly attended with serious consequences.

### ALLOPATHIC TREATMENT.

The remedy for scabies itch, is Sulphur upon going to bed. The body should be rubbed well with soft soap and a little warm water for fifteen or twenty minutes, then a warm bath for thirty minutes or more, then an Ointment Compound of two parts Sulphur, one part Carbonate of Potash, and twelve parts lard should be thoroughly rubbed over the whole body, especially, to the affected parts. The patient may bathe the next morning. This treatment should be repeated for three separate nights. A Solution of Sulphate of Copper—one ounce to the pint—may be used after the bathing, instead of the Sulphur Ointment. Clothes should be exposed to the fumes of burning Sulphur (Sulphurous Acid Gas).

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### ABSCCESS.

#### PSOUS-PSOITIS.

(Lat. *Abscedere*, to separate), a collection of pus in a circumscribed cavity.

The causes of abscess are often involved in obscurity, excessive exertions, a cold, rheumatism, mechanical injuries, caries of the bones, may be mentioned as probable causes. The name is given to collections of pus in some of the naturally existing cavities of the body. Of these we do not propose to treat in this article.

An abscess may be acute or chronic according to the character of the inflammation which produces it. The formation of an acute abscess is ushered in by a sudden or else rapidly increasing violent pain which it is difficult to define. It often radiates upwards or downwards, and soon produces a stiffness which materially interferes with the natural motions of the adjacent parts, the pain is generally, not always, of a throbbing character, and soon shows redness of the surface, if not too deeply seated; swelling and violent fever is mostly present, attended with increase in the pulse very marked. Pus forms rapidly, and is often so profuse in quantity as to indicate its first appearance by a succession of chills, distinct or suddenly following each other, called creeping chills, known by the sensation of "little chills playing tag up the patient's back." The fully-formed abscess can be reabsorbed, which is, however, rarely the case. When the pus has formed in consider-

able quantity near the surface, its presence may be readily discovered by the feeling of "fluctuation" produced by placing the fingers of one hand on one side of the swelling, and with those of the other giving a smart tap on the opposite side. If the cavity formed, and containing the pus is very deeply seated, it often baffles the skill of the most experienced surgeon to determine its presence and exact location. The pus usually tends towards the surface which it reaches by a gradual thinning of the intervening tissues; but if these be very resisting it may travel in other directions, possibly to break into some of the natural cavities, lungs or abdominal cavity, when it will be likely to result in death.

It is in these cases that an early incision by the surgeon is especially called for before "pointing" has taken place. In CHRONIC ABSCESS the pain, redness, fever, and increased temperature of the parts, may be absent, and for this reason it is, also, commonly known as *cold abscess*. In most cases, its progress is slow, and it may remain for a long time without any increase in size, or any tendency to open through the skin. Usually, it is necessary to open it; this may be done by simply cutting directly into the cavity.

TREATMENT is not surgical, except so far as the necessary slight amount of cutting into the cavity. In the first place, we have to try to scatter the inflammation before suppuration sets in, even if this cannot be accomplished in all cases, it is at all events certain that the spread of the inflammation may be prevented by appropriate treatment. The following is the best:

#### ALLOPATHIC TREATMENT.

Ulcers will be benefited by some of the following applications: Ten or twenty drops of Carbolic Acid in Glycerine, sometimes half a dram to a dram of Tannin should be added: a strong Solution of Nitrate of Silver—forty grains to the ounce—or the solid Stick; a Solution of Sulphate of Copper, three to ten grains to the ounce: Powdered Iodoform dusted over the ulcer, is an excellent application, as is pure Solicylic Acid. An Alum Curd (Alum dissolved in white of an egg) may be used, or if it prove ineffectual the surface may be dusted with powdered burnt Alum.

#### HOMEOPATHIC TREATMENT.

BELL, especially if the fever is accompanied by copious perspiration, and every motion aggravates the pain extremely.

RHUS should be given if the fever consists of a burning, dry heat, with intense thirst, if the trouble seems to have originated in a cold, and the pains are worse at night, and when the patient is lying down, or at rest.

If these two remedies do not effect an improvement, and the fever is mingled with chilly creepings, the pulse becomes very much accelerated, and the skin is at times very hot, and at other times drenched with perspiration, we should at once give *Mercurius*, which is the only remedy that can at this stage arrest suppuration, if such a result can be accomplished at all.



If an abscess forms, we give Hepar Sulph. in order to promote the suppuration, for the main point now is to evacuate the pus as rapidly as possible, and by this means to heal the sore as soon as the pus is discharged.

If the opening becomes fistulous, we must be prepared for a very tardy recovery.

SULPHUR is especially suited for chronic abscess, and for a tendency to suppuration, depending on a scrofulous constitution, when the pains are stinging in their character, and the pus of a healthy color.

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### WHITLOW OR FELON.

Is so well known that no description is needed. As soon as it is suspected that one is beginning to appear on the finger, remove the kind of skin lining from the inside of an egg shell in as long a strip as you can and rap tightly around the affected finger. This will, if used in time, stop the further progress of the disease, but is painful. If it has gone on until pus is already formed, the lance applied clear to, and a little way along the bone at the seat of pain, being *careful* that the knife does not cut *across* any muscle. After it is lanced apply poultices. Among the best of which is a linen *pad*, saturated with cold water, frequently removed and covered closely with a piece of oiled silk, bladder or similar substance.

### ALLOPATHIC TREATMENT.

The earlier the periosteum (membrane covering the affected bone) is divided with the knife, the sooner will the patient have relief. Saving the bone depends on the promptness of this measure, and serious difficulty is prevented by early resorting to it. Subsequent dressings are the same as for Carbuncles or Boils.

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### CHILBLAINS.

#### EXTERNAL TREATMENT.

TINCTURE OF ARNICA may in many cases be advantageously applied externally to the parts affected simultaneously with the internal exhibition of the same medicine, in repeated doses.

*Application:* To five parts of water add one of the concentrated *Tincture of Arnica*, and bathe the parts freely with this lotion, three times a day.

TINCTURE OF CANTHARIDES. In recent chilblains, induced by exposure to intense cold, this remedy may be applied externally with great success. It operates against the formation of vesicles or blisters, and aids in subduing the congestive action.

*Application:* Add four drops of the tincture, to two tablespoonsful of water, and bathe the parts with the lotion three times a day.

TINCTURE OF COSTICUM is to be preferred to either of the foregoing, for broken chilblains of old standing, and for those cases in which the ulceration has eaten deeply into the flesh.

*Application:* Add four drops of the Tincture to two tablespoonsful of water, and apply the lotion as directed for *Cantharides*.

## ALLOPATHIC TREATMENT.

Useful applications for Chilblains are: Take of Carbolic Acid a dram, Simple Ointment (or Lard) two ounces. Mix for an ointment; the surface may be painted with Tincture of Iodine.

Equal parts of Turpentine and Chloroform will give relief.

## FROZEN LIMBS.

**APPLICATION OF SNOW.** In slight cases of "Frozen Fingers," or other limbs, or portions of the body, the well-known practice of applying snow to the affected parts, is beneficial.

**CAMPHOR** (*Saturated Tincture*). When Snow cannot be procured, this is a valuable substitute. For young children this is more particularly applicable, especially, when the face is the seat of the injury.

*Application:* To five parts of *Spirits of Wine* add one of the *Tincture of Camphor*, and bathe the parts with this lotion freely twice a day.

**ACIDUM-NITRICUM** is a most efficient remedy in severer cases, both for internal and external exhibition.

*Dose:* Of a solution of six pills to the wine-glassful of water, give a teaspoonful every three hours.

**ACIDUM-NITRICUM** (*externally—second dilution*). This remedy may simultaneously with its internal administration, be applied externally.

*Application:* Add four drops of the Tincture, at the second dilution, to two tablespoonsful of water, and bathe the parts with this lotion three times a day. If convenient, it were preferable to saturate a piece of linen rag with the lotion, and to apply it to the frost-bitten part, covering the whole over with oiled silk.

**DIET AND REGIMEN.** Plain, wholesome, nutritious, but unstimulating diet; a sufficiency of active exercise in the open air; free ventilation; frequent change of linen; the free use of cold water.

## CORNS.

That these troublesome excrescences not unfrequently arise from an inherent vice of constitution, is evident, from the fact of many individuals who wear tight boots and shoes (unquestionably the principal exciting cause) escaping them, while others, with every precaution, suffer severely; such being the case, the main object must be, by a course of properly-selected internal remedies, to eradicate the predisposing cause or condition.

## PALLIATIVE TREATMENT.

Great alleviation of suffering has been found to result from bathing the feet in warm water, and from subsequently resorting to the following application:

**TINCTURE OF ARNICA.** A lotion composed of a weak solution, should be employed, the corn after it has been previously soaked in warm water, after being pared down with great care. The skillful reduction of the corn by an experienced operator, may likewise be mentioned as a ready and prompt *palliative* treatment.

Equal parts *Spirits Ammonia* and lemon juice applied twice daily after thoroughly soaking the feet in warm water is excellent.

## Part Twelfth.

### CONSTITUTIONAL DISEASES.

## CHAPTER XXVIII.

### ACUTE CONTAGIOUS DISEASES.

#### MEASLES.

##### MORBILLI.

Measles attack individuals of every age and sex, but least frequently very old people and infants. Inasmuch as almost everybody has an attack of measles in his early youth, they are on this account seldom met with among old people. One attack of measles generally protects persons against a second one : exceptions, however, are not very rare, although it behooves us to guard against mistaking roseola for measles.

The ordinary season for measles are the months when catarrhs are common, from October till April.

**SYMPTOMS AND COURSE.** The incubation-period of the measles-contagium, until the efflorescences break out upon the skin, is eleven or at most twelve days. The general health does not seem in the least disturbed in the first eight to nine days of this period, definite preliminary symptoms show themselves in the last two or three days. These preliminary signs are falsely said to have been noticed at an earlier period ; but as catarrhal affections are very prevalent during epidemic measles, it is very likely that purely catarrhal symptoms have been mistaken for the prodromi (premonitory symptoms) of measles. The prodromi proper begin with a slight catarrh of the nose, lassitude and some fever. This fever increases considerably on the second day, frontal headache supervenes, the eyes look red, are sensitive to the light, but the conjunctiva is seldom puffed up. On the third day there is another increase of fever, the patients feel unable to sit up, the tongue is thickly coated, the appetite gone, and in the night from the third to the fourth day, immediately previous to the appearance of the exanthem, a hoarse, barking cough sets in resembling croup, which, however, is scarcely ever attended with the danger that generally characterizes croup, and never changes to true croup. These symptoms may increase to a considerable degree of intensity, may be associated with vomiting, delirium, sopor ; at times, however, they are entirely wanting or so slight that it is not deemed necessary to confine children to the room. This is the reason why the measles spread so rapidly through the schools, for it is on the day previous to the breaking out of the measles that the infectious principle is most active, and that the measles are most easily communicated. We

account for this circumstance by the fact that in the last twenty-four to twelve hours previous to the appearance of the exanthem upon the skin, distinct, lentil-sized measles-spots are perceived, in almost every case, on the sides of the fauces. Without doubt, it is the extension of these spots to the larynx and trachea that causes the peculiar croupy cough, and we have always considered it an excellent diagnostic sign to find this cough associated with red spots on the palate, in which case we were able to positively predict the appearance of the eruption within twenty-four hours. In other respects the prodromi have no distinctive peculiarity from which the character of the exanthem might be inferred; it can at most only be suspected after several cases had already occurred in the place, or in its immediate vicinity.

The measles-exanthem breaks out gradually, in one case more rapidly than another. The first spots always show themselves in the face, most commonly on the cheeks and temples. They are of the same size of a bright redness and with rather sharp outlines; after being out for a short time, they become somewhat raised above the skin and harder. With more or less speed, generally within twenty-four to thirty-six hours, the exanthem comes out over the whole body from above downwards, and is fully out in forty-eight to sixty hours, so that no new spots appear; up to that time, new spots had continued to break out in addition to the first spots that were more or less scattered and isolated. The spots keep growing in size to such an extent that some of them run together, and the normal skin, in the place of spots, exhibits here and there irregular red patches.

In proportion as the exanthem comes out more profusely, its color generally grows darker, sometimes with a bluish tint. With the fuller development of the eruption the constitutional symptoms most commonly increase in intensity. The catarrh of the conjunctiva and the cough, especially, grow much worse. The pulse sometimes increases to one hundred and forty beats. Sometimes the skin is dry, but at other times covered with perspiration. In very rare cases the constitutional equilibrium remains undisturbed, even during the eruptive stage; however, in every considerable epidemic a child with measles is occasionally seen running about the streets.

If the exanthem runs a mild course, its decrease commences at the end of the third day, seldom before this time, and continues with great rapidity until the eruption has entirely disappeared. The spots grow smaller, assume a distinctly yellowish tint, which is especially marked on pressure with the finger, and within twelve to twenty-four hours the spots have completed their disappearance without leaving a vestige of their existence. Very frequently, however, the yellowish tint remains for several days. The fever declines very speedily, but the bronchial catarrh most generally continues for a few days longer, and resolution, sometimes does not take place until a considerable quantity of mucus has formed. Not unfrequently the patient is, at this period, attacked with diarrhœa for one or two days. Profuse perspiration is not the rule, but is not by any means an unusual occurrence.

Desquamation (peeling off) commonly commences on the seventh day but may delay until the fourteenth. The skin comes off in bran-shaped



scales, very seldom in larger patches ; in the face and on the extremities the desquamation is most distinct. During this period, the general health is generally good ; except that the bronchial catarrh and still less frequently the diarrhoea may continue to some extent.

Among the malignant deviations we name the following :

The spots, when first coming out, are of a pale-red color which do not increase in intensity, nor does it acquire the yellowish tint. Within the spots hemorrhagic appearances are manifested, and between the spots ecchymoses are noticed. The spots fade away soon after their appearance, or else they fade very suddenly at the regular period or before.

In the case of children the pulse exceeds 140 beats, and in the case of adults 120 beats ; moreover it is a small pulse. The tongue is dry. Angina tonsillaris. Diphtheritic membranes form in the buccal cavity. The respiration becomes hurried and superficial. Sopor and delirium after the second day of the eruption.

Of great importance are certain complications of measles, that are very apt to occur and which were formerly regarded as metastases, because the exanthem disappears with the appearance of these complications. Laryngitis with croupous exudation is of rare occurrence while the exanthem is still out ; it is more commonly met with after the exanthem has left the skin. A slight bronchitis is an accompaniment of every case of measles ; it only assumes a dangerous character, if it continues beyond the stage of decline, or reappears again during the stage of desquamation, or otherwise assumes a very acute form. It is very apt to run into an exceedingly obstinate chronic catarrh.

Enteritis (inflammation of the bowels) is a rather frequent complication in some epidemics ; it excites legitimate apprehensions, for the reason that other consecutive diseases, more particularly scrofulosis, are apt to follow in its train. Affections of the brain are rare ; their intensity is rarely such as to excite apprehensions ; the supervention of sopor is a bad sign, because it may usher in a fatal general paralysis.

Of the highest importance are likewise the numerous and always obstinate sequelæ (result of the diseases) of the measles, which make this exanthem one of the most malignant, whereas, its ordinary normal course and character entitle it to be regarded as one of the most harmless. Among these sequelæ we distinguish :

Chronic conjunctivitis (inflammation of the eyes), with impaired vision ; chronic ostitis, with deafness ; chronic ozæna ; chronic inflammation of the lymphatic glands, mostly without suppuration ; chronic inflammation of the parotid and submaxillary glands.

Chronic bronchial catarrh, which gives rise to a peculiar spasmodic cough ; or real whooping-cough which is much more severe as a sequela of measles than when setting in at other periods, and which very often develops almost dangerous pneumonia.

After measles, children are very frequently attacked with scrofulous symptoms. It is very likely that, in the case of little children, the measles simply act as an exciting cause of scrofulosis ; but it is likewise among larger children that, after an attack of measles, all sorts of phenomena

make their appearance, which we are in the habit of designating as scrofulous, and which go to show that a morbid change has been impressed upon the whole activity of the organism.

Tuberculosis (consumption) likewise frequently breaks out after meals.

#### ALLOPATHIC TREATMENT.

In mild cases of uncomplicated measles the treatment will consist of good hygiene and the relief of such symptoms as annoy or give trouble.

The patient should be in a large well ventilated but somewhat darkened room, with a temperature which will be comfortable for attendants to sit in—68° or 70°—and should be uniform day and night. Such a temperature is comfortable and in it there is no danger of taking cold from temporary or accidental uncovering of the patient.

The diet should be light and simple, consisting of milk or milk and water, raw eggs beaten up with sugar and water, gruel, toast, and such other farinaceous articles as the patient desires. Any simple drinks, cold water, lemon- or orangeade, gum- barley- or ricewater, flaxseed tea, etc., may be allowed as freely as desired.

Emetics and cathartics are not to be given, but if the bowels have not moved for a couple of days, an injection of warm water or a laxative dose of Castor Oil (a dessertspoonful) or Citrate of Magnesia (a teaspoonful to a dessertspoonful for older children.) The injection is to be preferred on account of the irritable state of the bowels.

Remedies are indicated for the relief of bronchitis and cough or restlessness. Opium and Hyoscyamus are best suited for this. From five to ten grains of Dover's Powder with half a grain of the solid Extract of Hyoscyamus or fifteen to twenty drops of Laudanum with an equal quantity of Fluid Extract of Hyoscyamus may be given from two to six times in the twenty-four hours. For children opiates may be given as directed for bronchitis or pneumonia. Owing to the danger from severe bronchitis or pneumonia it is best in severe cases to have an oiled muslin jacket worn over a flannel shirt.

A malignant form of the disease will require tonics and stimulants. Of these Quinine may be given in doses of half a grain to three grains, three to six times a day. If the pulse is weak Carbonate of Ammonia in doses of one to ten grains in half a teaspoonful to a tablespoonful of Spirits Menderoces two to six hours apart. Brandy is similarly indicated and should be given in liquid food in doses of half a teaspoonful to a tablespoonful, or more, according to the age of the patient and severity of the symptoms of prostration, and may be given from three or four times a day to hourly.

For high fever, with a strong bounding pulse, no remedy acts better than Aconite. A drop of the Tincture can be given to an adult every hour until an impression is made on the fever, and then at longer intervals to maintain the effect. When the eruption is especially irritating much relief will be afforded by oiling the skin as in scarlet fever.

Complications of any kind should be treated as directed for the special diseases, bearing in mind that supporting treatment only is appropri-

ate for serious complications. The precautions directed by the New York Board of Health against the spread of Scarlet Fever and Measles should be observed.

An unusually high fever, when there is no sweating, will be benefited by a cool sponge bath or wet pack.

Sleeplessness, which is not relieved by the Opium or Opium and Hyoscyamus given for cough, may be relieved by giving to an adult twenty grains each of Chloral Hydrate and Bromide of Potassium in syrup and water in one dose at bed time.

The Health Board of New York enforce the following Sanitary Regulations against Scarlet Fever and Measles:

"CARE OF PATIENTS.—The patient should be placed in a separate room, and no person except the physician, nurse, or mother, allowed to enter the room, or to touch the bedding or clothing used in the sick room, until they have been thoroughly disinfected.

"INFECTED ARTICLES.—All clothing, bedding, or other articles not absolutely necessary for the use of the patient, should be removed from the sick room. Articles used about the patient, such as sheets, pillow cases, blankets, or clothes, must not be removed from the sick room until they have been disinfected, by placing them in a tub with the following disinfecting fluid: eight ounces of Sulphate of Zinc, one ounce of Carbolic Acid, three gallons of water.

"They should be soaked in this fluid for at least one hour, and then placed in boiling water for washing.

"A piece of muslin one foot square, should be dipped in the same solution and suspended in the sick room constantly, and the same should be done in the hall way adjoining the sick room.

"Feather beds and pillows, hair pillows and mattresses, and flannels or wollen goods, require fumigation, and should not be removed from the sick room until this has been done. Whenever the patient is removed from the sick room inform the Bureau of Sanitary Inspection when the disinfecting corps will, as soon as possible thereafter, perform the work of fumigation.

"All vessels used for receiving the discharges of patients, should have some of the same disinfecting fluid constantly therein, and immediately after use by the patient, be emptied and cleansed with boiling water. Water closets and privies should also be disinfected daily with the same fluid, or a Solution of Chloride of Iron, one pound to the gallon of water, adding one or two ounces of Carbolic Acid.

"All straw beds should be burned, but must not be removed from the sick room without a permit from this department. They will be removed by the disinfecting corps.

"It is advised not to use handkerchiefs about the patient, but rather soft rags for cleansing the nostrils and mouth, which should be immediately thereafter burned.

"The ceilings and side walls of the sick room after removal of the patient, should be thoroughly cleaned and lime-washed, and the wood-work and floor thoroughly scrubbed with soap and water.

"As a fumigating, antiseptic, and disinfectant, Chlorine Gas stands unrivaled. The ingredients used in its production should be in glass or

earthen deep dishes or saucers placed in the higher parts of the room. The Gas will descend, being heavier than the air, and becomes mixed with surrounding air. The following articles are used for its production: One part of common Salt mixed with one part Black Oxide of Manganese, and placed in shallow earthen vessels; two parts Sulphuric Acid previously diluted with two parts by measure of water, is then to be poured over it and the whole stirred with a stick. The room with the infected articles, should be then shut up tightly, and remain closed for several days. The cleaning, scrubbing, and white washing can then follow.

#### HOMCEOPATHIC TREATMENT.

ACONITE,—which is particularly indicated when the fever assumes an inflammatory form, attended with dry heat of the skin, heat in the head, with confusion and giddiness, redness of the eyes, intolerance of light, general weakness or prostration; *whenever marked febrile or inflammatory action becomes prominent.*

*Dose:* Six pills every two to four hours, in water.

PULSATILLA is also very efficacious in this affection, and is frequently indicated in the commencement, by the striking predominance of the characteristic *catarrhal* symptoms attendant upon measles, further qualified by aggravation towards evening. This remedy is of great utility in bringing out the eruption, when it is longer than the average period in making its appearance. *Pulsatilla* is also valuable when any derangement of the stomach is present, or when the cough, which so generally accompanies the disease, is worse towards evening or in the *night*, and is attended with considerable rattling of phlegm in the chest, or copious, thick, yellowish or whitish expectoration, sometimes followed by vomiting, or symptoms of approaching suffocation; further, when there is cold in the head, with a thick, yellowish or greenish nasal discharge.

*Dose:* Six pills every four hours, in water.

BRYONIA is an excellent remedy, when the eruption is faint, retarded, or imperfectly developed, and the *respiration much repressed and laborious*, attended with aching in the limbs; also, when there is a dry cough and the patient complains of shooting pains in the chest, increased by a full inspiration,

*Dose:* As for *Pulsatilla*.

SULPHUR is, in general highly beneficial after the active symptoms of the disease have yielded to the action of immediate treatment, and especially after the previous administration of *Pulsatilla*, particularly when we have reason to suspect a scrofulous or other constitutional taint. Sulphur will, frequently, in such cases, be most effective in eradicating the predisposition to Chronic affections engendered by measles.

*Dose:* Six pills in a tablespoonful of water, every morning (fasting) for ten days.

#### CHECK OF THE ERUPTION.

The disease has frequently terminated fatally, from the eruption being driven in by sudden exposure to cold or change of temperature.



BRYONIA is generally found efficacious in re-evolving the eruption, and preventing disastrous consequences.

*Dose:* As directed above.

PULSATILLA is indicated, if looseness of the bowels, with mucus discharge, follow the suppression.

*Dose:* As directed for Bryonia.

### AFTER-EFFECTS OF MEASLES.

#### COUGHS.

In general the treatment of such affections will be most effectually conducted by following the instructions furnished separately in the article on "Coughs."

#### LOOSENESS OF THE BOWELS.

Explicit directions on this subject will be found in the article on "Diarrhœa."

#### INFLAMMATION OF, OR DISCHARGE FROM, THE EARS.

(See page 199.)

#### TENDERNESS OF THE SKIN.

MERCURIUS. This remedy, administered for a brief time is generally sufficient to remove the tenderness which is so peculiarly apt to result from measles.

#### ERUPTIONS ON THE SKIN.

NUX-VOMICA is indicated, in cases of this kind resulting from measles, by the presence of an eruption of minute white grain-like elevations.

*Dose:* Six pills every evening for a week.



### SCARLET FEVER.

#### SCARLATINA.

This is distinguished from other eruptive fevers by the fact of the eruption being an exanthema, an efflorescence, or a rash; these terms not being strictly applicable to vesicles and pustules. Scarlet fever is highly contagious, and it may be communicated by means of fomites (producers of contagious disease). The infectious material remains for a long time in garments, bedding, carpets, wall-paper, etc., preserving its power of producing the disease. It is, doubtless, occasionally transmitted through the air at great distances; and, hence, sometimes breaks out spontaneously without any agency of affected individuals, or clothes of any kind. It is difficult to determine the duration of the period from the time of exposure to the contagious principle to the full development of the first well-marked symptoms. AUSTIN FLINT, and other recognized authorities, argue that 24 hours, often, is the extent; but 8 days is generally allowed to be the period in a vast majority of cases. As a rule the disease is experienced but once; but exceptions are not very rare; the author has known of a case where the same individual has been attacked

four times. The contagion is most freely active soon after the appearance of the exanthem. As soon as the fever has subsided, the contagious nature of the disease has, most probably, become extinct. Children are much more susceptible to the special cause than adults. After 40 years, *very* few persons are attacked; also children, under two years, rarely contract the disease, and many persons appear to be entirely free through life, notwithstanding numerous exposures. The largest number, and most malignant cases occur between the second and seventh year; a much smaller number between the eighth and twenty-fifth year; from twenty-five to forty it is very rare.

Scarlatina very often occurs in a neighborhood, either in company with or immediately after, epidemic measles. It also, not unfrequently occurs in company with small-pox.

**SYMPTOMS AND COURSE.**—The disease is variable, both in its symptoms and course, and we will now endeavor to point out the fixed types of scarlet fever: The patients exhibit the symptoms of a severe cold (catarrhal fever), which, unlike measles, is *not* often attended with a cough, but with inflammation of the throat, and loss of appetite and generally, occasional vomiting; the pulse is very rapid; the skin seldom moist. After the preliminary stage has lasted two days, the exanthem makes its appearance, generally with a marked increase of the fever, and other preliminary symptoms. Children are attacked with convulsions at this stage more frequently than at any other. The eruption is first visible in the throat, on the tonsils, etc.; externally, on the neck, whence it spreads downwards over the rest of the body. First, we notice closely-crowded red spots (stigmata), these very speedily run into each other, causing a homogenous, faintly-dotted redness, or else they grow in size, and running together form single spots of a darker color, seated upon a faintly-red skin; or, finally, small vesicles spring up upon the red surface, most generally in consequence of the intense character of the skin affection. The exanthem is, in cases running a natural course, generally fully out in twenty-four hours after the first external appearance; during all this time the fever has continued as high, or even more intense, than before; the thirst great, the tongue coated, or, cleared of its coat, showing a dark strawberry appearance. One of the most constant of the symptoms of this fever is this strawberry tongue. The urinary secretion is much less; sometimes a little cough makes its appearance now, but rarely assumes a violent form. The throat is very sore, dark red, and swollen; the surface of the body is also swollen. On the fifth or sixth day after the appearance of the eruption, it begins to pale off, with lessening of the fever and much more so the sore throat (*angina*).

Soon after this, the process of desquamation (peeling off), begins. It always begins on the neck with small scales; on the body, and more particularly on the hands, the skin peels off in large patches; the itching is now severe, and may be allayed by rubbing the itching parts with some pure clean oil; the appetite now speedily returns and the patient feels quite well; in fourteen days at the latest the desquamation is completed.

Such is a plain case, and unless some important variation takes place

frequent sponging of the whole body, cooling drinks and pure air, are all the remedies needed. But variations are so frequent that too much watchfulness is impossible. As soon as a change takes place in any symptom, study, *at once*, its meaning, and if not fully satisfied as to the result being favorable, call aid without delay.

#### ALLOPATHIC TREATMENT.

Rigid isolation should be provided in all cases of Scarlet Fever, as a precaution against its spreading. They must be watched most carefully in every instance, for some of the most dangerous complications (co-existing diseases) and sequelæ (resulting diseases) occur in those cases, which, from their very mild character, have been left almost, if not entirely, to themselves. Competent medical aid should, in all cases, be called upon the first appearance of a serious symptom, or one that is not wellunderstood or certain to result favorably.

Mild cases of scarlet fever do not call for active measures of treatment, but whether the disease is mild or severe, the strictest attention should be paid to hygiene (health rules). To this alone mild cases can be safely trusted. The room ought to be large and freely ventilated. The temperature of the room should be carefully kept at 70°, except when the fever is extremely high it may be as low as 65°. The clothing on the bed should not be heavy enough to increase the heat of the body or to be disagreeable to the patient, nor light enough to cause chilliness. The body linen and the bed linen must be changed every day. After the fever has begun to decline and the heat of the skin greatly diminished during the latter part of the disease, the heat of the room should not fall below 70° day or night. If the child is pale, weak, and chilly, the temperature of the room should be kept as high as 72°.

Chilliness and taking cold must in all cases be avoided after the fever has begun to decline and the scarfskin shed off (disquamation) on account of the liability of causing inflammation of the kidneys and dropsy, the most dangerous complications and sequelæ we have to contend with. The patient should be kept in bed until the disquamation entirely ceases, nor should he be allowed to leave the house within four weeks.

At first light food only should be given, such as milk and its preparations, meat broths, egg beaten up with sugar and water, given raw, arrowroot prepared with milk and water, and gruels, but nothing more substantial should be given during the earlier stages of the disease. Cold water, lemonade, and juice of fruits may be freely allowed. As the fever declines and the patient recovers, the regular diet should be gradually resumed. If, however, there is great weakness or the case has run some time beef essence, juice of meats, egg beat up with sugar and milk should be given frequently and in such quantities as the child can be induced to take. Small quantities of wine, wine whey, milk punch or egg-nog should also be given. A teaspoonful of whisky or brandy and two or three table-spoonsful of sherry wine, is a dose for a child one to three years old. One or two table-spoonsful of whisky or brandy and a wineglassful of wine is a dose for an adult (grown person.)

In general a tepid bath should be given twice a day, the temperature

of which should be 90°, if the fever is moderate, or 80° if very high. The patient is undressed and immersed in the water for fifteen minutes or half an hour, until the heat of the body is reduced and the patient quieted. If the bath is not practicable, frequent sponging of the whole body with tepid or cool water, as the fever is moderate or high, every two, three or four hours, or the application of the wet sheet—*wet pack*—once a day, should be practiced. In the applications of the wet sheet, the sheet should be wrung out of cool water of 60° or 70°, according to the degree of fever, and the patient, stripped of all clothing, is enveloped in the sheet and then surrounded with several blankets. Usually, after remaining in the pack for about an hour, free sweating takes place. The pack is then removed, the patient wiped dry and placed in bed. When the heat of the body is 104 degrees, or higher, the *cold wet pack* should always be used, and will render most signal service. If not as high, frequent sponging is preferable in domestic practice.

In no case should the bath with water, in any form, be given when the patient is sweating, or the skin moist.

When the body is wiped dry, after each bath, sponging, or pack, it should be well rubbed with oil, from head to foot, except the face and scalp. One of the best ointments for this purpose is the following: Take of Glycerine one dram, Rosewater Ointment one ounce. Mix. Only that part of the body which is being rubbed should be uncovered at a time, or the whole can be done under the bedclothes. Glycerine one part and Sweet Oil four parts is a good application, or pure Lard may be used alone for the purpose. This oiling of the body relieves the itching and burning of the skin, keeps it moist and soft, and is, in a general way, beneficial, as is shown by the lowered temperature and pulse. It should be applied at least twice a day, even if a bath is not given as often, and continued during the stage of desquamation. As a rule, cathartics should not be given, but constipation should be relieved by injections of warm water.

For the sore throat, a solution of Chlorate of Potash one dram to the pint of water, of which the patient can drink at will, is probably all that is needed to be done in mild cases. This remedy is beneficial in a general way, as well as giving relief to the throat. If the glands are enlarged (hard lumps about the neck), Tincture of Iodine may be applied with a camel's hair brush or feather. When the throat is severely inflamed, compresses wet with cold water should be applied to the sides of the neck. They should be changed often, to maintain a uniform degree of cold. Pounded ice may be applied to the sides of the neck in little bags, if the inflammation of the throat is so violent and the fever high. The solution of Chlorate of Potash, kept cold, should be given often as a drink and a gargle, if the patient is old enough. Small lumps of ice may be held in the mouth, or ice water frequently swallowed. When the violence of the inflammation has begun to decline, or the cold becomes disagreeable to the patient, or if suppuration (forming pus or matter) begins, the cold should be displaced by warm applications; warm poultices kept on the neck by a light kerchief, or a flannel cloth wrung out of hot water and applied to the neck well covered with cloths to retain the heat. I



the discharge accumulates in the throat and nose, it should be removed by a soft cloth swab or feather wetted in a solution of Alum, in green tea or sage tea, or Borax mixed with honey and water. When the discharge is of a fetid or suppurative (pus-like) character, the following application should be made to the throat, with a soft swab, three or four times a day: Take of Carbolic Acid twelve drops, Glycerine one ounce. Mix. If the nose is invaded with the inflammation, it should be carefully cleansed and the same mixture carefully and thoroughly applied with a feather or camel's hair brush.

Quinine should be given through the whole course of the disease, from the beginning of high fever until recovery is well established, and the appetite good. The dose is from one to two grains, for a child, three or four times in the twenty-four hours; and three to five grains for a grown person, at the same intervals.

As soon as the desquamation (shedding off of scarf skin) begins, the Tincture of the Chloride of Iron should be given in five-drop doses to a child, and from fifteen to twenty drops to an adult, three times a day. It should be given well diluted in water.

In malignant cases, in which the system is overspread by the disease, denoted by excessive frequency of the pulse, the chief reliance is on alcoholic stimulants, in the forms before mentioned, and they should be freely given.

*Uremia* (Urea, constituent of urine remaining in the blood) is the most serious result of diseased kidneys, and is indicated by prolonged convulsions, headache, disturbance of the sight, or insensibility, and should be promptly met by a cathartic dose of Epsom Salts—two table-spoonsful for a grown person, and one to two table-spoonsful for a child. Free sweating should be produced quickly, by the use of the warm wet pack, or better, by the *hot-air bath*, once or twice a day. The *hot air-bath* can be given by putting the patient, stripped of clothing, in a cane-seated chair, then wrap a large blanket around both the patient and the chair, from his neck to the floor, covering the whole in tightly, except the patient's head; then burn alcohol in a saucer under the chair until free sweating is produced. Hot flannels should be applied constantly to the loins. The physician should be promptly sent for upon the first appearance of any of these symptoms. He will probably give *Elatereum* for a cathartic.

Dropsy will be treated by hot-air baths, or the hot wet pack, once or twice a day. The bowels should be kept open by Rochelle Salts or Castor Oil, in doses of a teaspoonful for a child, or a table-spoonful for an adult, repeated every six hours until the bowels open. The Quinine and Iron, before mentioned, should be given through this complication. The following mixture, to act on the kidneys, is useful:

Take of Acetate of Potash one dram, or half an ounce; Tincture of Digitalis one dram, or half an ounce; Syrup of Squills three drams, or an ounce and a half; Water two ounces or eight ounces. Mix, and give a teaspoonful every four hours, to a child; or a table-spoonful, for an adult. Use the smaller quantities in filling the formula for a child, and the larger for a grown person. In the absence of this mixture, the patient may

drink quite freely of a decoction (tea) of Juniperberries or Watermelon Seeds.

If discharge from the ear occurs, it should be frequently syringed with warm castile soapsuds, and the Carbolic Acid in Glycerine, before mentioned, applied.

As a preventive of Scarlet Fever, *Belladonna* has some reputation. Take of Extract of *Belladonna* three grains, Alcohol one dram, water half ounce. Mix. A drop morning and evening, for each year of the child's age, is the dose.

Clothing, and other articles, which have been exposed to the poison of Scarlet Fever can be cleansed by immersing them in boiling hot water, or exposing them to a heat of over 200°. All unnecessary articles of furniture or clothing should be removed from the room, before the Scarlet Fever patient occupies it.

#### HOMEOPATHIC TREATMENT.

In those cases in which the disease appears in its simple form, the skin presenting the characteristic hue, with a smooth and glossy surface, *Bell.* is a specific remedy.

Even in the severer forms of Scarlet Fever, when the throat is considerably affected, and high fever or congestive symptoms set in, and which, if not properly treated: or if they occur in a bad habit of body, may assume the malignant type, attended with ulcerated sore throat, extension of the inflammation to the air-passages, delirium, spasm, etc., *Bell.* is a very valuable remedy. It should be given as soon as the throat and tongue become affected with dryness and burning, and there is a desire, but complete inability to swallow even drinks or saliva; with sense of suffocation; further, when the throat is of a *bright-red* color, having its surface excoriated, or covered with white specks, or stringy mucus, or presenting the appearance of thrush; the tonsils swollen, and the tongue of a *bright fiery-red hue*, sometimes interspersed with dark-red patches at a later period of the disease; also when delirium exists. If the disease have taken a favorable turn, we may allow *Bell.* to continue its action; but if, after twenty-four or thirty-six hours, the swelling and inflammation increase rather than diminish, as is the case sometimes in strumous constitutions, or if we already perceive an appearance of ulceration commencing, with increase of mucus, give at once *Mercurius*. If, on the other hand, the ulcers present a livid appearance about the edges, and emit an offensive odor, or, when there is an excessive thirst for small quantities of water, and an *extreme prostration of strength*, *Arsenicum* is to be preferred to *Mercurius*, and if this medicine prove inadequate to a complete cure, it should be followed by *Nux-c.* (see *ulcerated sore throat*). *Nux-c.* is moreover of considerable efficacy, when a large quantity of viscid mucus is secreted from the inflamed and tumefied lining of the fauces, which adheres so tenaciously, that it is with difficulty expelled, and sometimes even threatens suffocation. *Pulsatilla* is also useful in such cases.

When the fever assumes a clearly inflammatory type, and the pulse runs high, we may administer *Aconite* in the same manner as given under INFLAMMATORY FEVER, which see.

When the quickness of the pulse, and other febrile inflammatory symptoms are subdued, and the affection of the throat again appears most prominent, we may return to *Bell.*, especially if the skin retain the peculiar scarlet hue.

OPIUM may follow the *Bell.* when there is burning heat of the skin, drowsiness, stupor, heavy breathing, open mouth, eyes half closed, restlessness with vomiting, or convulsions.

PULSATILLA is indicated when derangement of the stomach and digestive organs is a prominent symptom, the face pale, red, or bloated; disposition fretful and sensitive, or melancholy, with crying or tears without sufficient cause.

#### COMPLICATED FORMS OF SCARLET FEVER.

Varieties of Scarlatina not unfrequently occur in which the characteristic peculiarities of the efflorescence are wanting, namely the color, which is not a bright scarlet but of a darker hue, and the effect of pressure which does not leave the *white impression* after it. There are, also, cases in which small granular elevations appear upon the surface of the red patches. These variations from the foregoing description of the manifestations afforded by Scarlet Fever are not to be mistaken for indications of a *different disease*, but should be accepted as signs of a *different type* of the same disease. There are also instances in which the eruption is confined to internal parts, when, with the characteristic acceleration of pulse, there is sore throat, and the mouth and throat are bright, red, hot swollen, and often very dry. This variety will be subject to treatment, such as that already detailed, *according to the special indications present.*

Other instances, again, occur of a yet more insidious character, which are not distinguished until the dropsical swellings supervene, and which either evince no eruption at all, or so slightly as to escape notice.

This variety, must in all instances, be treated as directed for the like symptoms supervening, as the after-effects of the disease when the eruption has been struck in or imperfectly developed. Another very dangerous complication, which is frequently associated with scarlet fever, consists of inflammation of the upper part of the windpipe.

This variety should be subjected to the treatment prescribed in the article devoted to the consideration of that particular disease, so long as symptoms of this nature continue—returning, however, to the specific treatment of the primary disease (SCARLET FEVER) as already directed in this chapter, as soon as the complication is subdued.

Another variety is characterized by degenerating into a low typhoid type, in which cases the following treatment becomes requisite.

AMMONIUM-CARB., ARESINCUM, ACIDUM-PHOSPH., SECALE-CORN.

From amongst these remedies a selection should be made by accurately studying the symptoms of the case, and by comparing them with the indications afforded under the head of each symptom respectively, in the article "Repertory."

Cases in which the throat becomes the chief seat of danger, require the following treatment:

ARSENICUM is indicated in the majority of cases in which severe and dangerous *sore-throat* accompanies SCARLATINA, the tonsils being swollen into hard tumors, often as large as apples, attended with snorting and difficult breathing, enlargement of the adjacent glands, *remittent pulse*, and

*Dose:* Six pills every two to four hours.

ACIDUM-NITRIC., ACONITUM, LYCOPODIUM, BELLADONNA.—If little or no improvement should have followed the administration of Arsenicum within the time just stated, proceed with these remedies in succession in the order in which they are placed, (dose as for Arsenicum).

#### AFTER-EFFECTS OF SCARLET FEVER.

Scrofulous subjects in particular are subject to a multitude of consecutive ailments of Scarlet Fever, which are often of an obstinate character, and require careful treatment and great precaution.

##### *Excessive Susceptibility to take Cold.*

In general, also, we may number amongst these after-effects, when the skin has been cast, an exceeding susceptibility to take cold, which, if not obviated, may entail serious consequences.

TREATMENT.—As accessory precaution we may mention great care as to diet, sufficient exercise out of doors, if possible, but *only in very dry weather*, warm clothing, and avoidance of drafts, without, however, resorting to the extreme of *coddling* or the *exclusion of free ventilation*, which is as essential to thorough recovery as medicine.

CALCAREA should, in the majority of cases, be administered (unless there be symptoms which distinctly point to other remedies) in repeated doses.

#### RAWNESS OF THE FACE.

CHAMOMILLA, BELLADONNA, AURUM-TRIP. Chamomilla may, in most cases, be employed singly with perfect success against this troublesome consequence. When, however, an inflammatory tendency continues, and the affected parts are much swollen and painful, etc., it will be desirable to resort to alternate administration of Chamomilla and Belladonna as follows; and if no relief follows take Aurum-trip. Four doses daily.

#### OFFENSIVE DISCHARGE FROM THE NOSE.

AURUM is indicated by offensive discharge of *matter*, from the nose, with soreness and swelling of the interior, following SCARLET FEVER.

#### SORENESS OF THE NOSE, ETC., WITH SWELLING OF THE GLANDS.

MERCURIUS and HEPAR-S., SILICEA, SULPHUR, CALCAREA.—Mercurius is required when there is soreness of the nose and face, with swelling of the glands on the inner side of the lower jaw, followed, if necessary, by one or more of the other remedies named.

#### PUFFINESS AND SWELLING OF THE FACE AND EXTREMITIES, ETC.

BELLADONNA is in most cases sufficient to overcome the following



symptoms, occurring as the after-effects of SCARLET FEVER, namely:—Puffiness of the face, swelling of the hands and feet, lingering fever in the evening, glandular enlargements, chaps about the mouth, severe headaches, stammering, etc.

#### DROPSICAL SWELLINGS, ETC.

ARNICA, BELLADONNA, HELLEBORUS, ACIDUM-PHOSPH., GELSEMI-NUM. One or more of these remedies respectively according to the detailed indications afforded respecting them in the Repertory should be administered, when symptoms of Water on the Brain supervene, such as dullness of the mental faculties, with evident painful effort to *think clearly*; excessive drowsiness; weakness of the feet and repeated falling down; squinting dilation of the pupils, etc., etc.

ARSENICUM, HELLEBORUS, DIGITALIS. Selection should be made from these remedies, particularly when symptoms of Water on the Chest supervene, such as: painful oppression of respiration *aggravated by motion or by lying on the back*; the patient is suddenly disturbed in sleep by a suffocative sensation, which compels him to sit up, or even to get up, and seek for air; or even inability to lie down, necessitating a sitting or even a perfectly erect posture; *short, dry, and even spasmodic cough*, and stitching crampy pains between the shoulders; excessive anxiety, etc.

#### MUMPS.

MERCURIUS, CARBO-VEG. Mercurius is specific in the majority of cases of Mumps under these circumstances.

*Dose*: Four globules in a teaspoonful of water every six hours, until amelioration or change; but if no improvement whatever should ensue within four hours after the second dose, or especially if there be reason to believe that the patient has been treated with Mercury, proceed with the next remedy.

CARBO-VEG. This remedy is required in cases in which a few doses of Mercurius produce no effect whatever, and more particularly when the patient has been subjected to doses of Mercury, or if *induration* begin to be developed.

*Dose*: In every respect as stated for Mercurius.

CALCAREA, KALI-CARB. These remedies are invaluable in very obstinate and continuous cases, and should be selected, if the symptoms be conformable to those recorded of these medicines in referring to the “Repertory.”

*Dose*: Of either remedy, as selected, give six globules in a tablespoonful of water, morning and evening for ten days (if the malady does not sooner yield.)

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#### SMALLPOX.

This disease is, by medical practitioners of the present day, divided into two varieties:—the *distinct*, when the pustules on the face are clearly defined, and do not run into each other,—and the *confluent*, when they coalesce and form one continuous whole.

When the symptoms are less severe than those properly characteristic of the disease, and the eruption on the face slight, it is called the *modified* smallpox. We generally find this description in such persons as have been properly vaccinated,—a precaution, which, although not always a preservative against the attacks of smallpox, greatly lessens its virulence, and gives a milder character to the complaint, when taken.

**SYMPTOMS.**—The disease is frequently very sudden in its attacks, commencing with chilliness and shivering, followed by symptoms of fever, headache, severe pains in the small of the back and loins, languor, weariness and faintness; the patient also complains of oppression of the chest, and acute pain in the pit of the stomach, increased by pressure. The eruption makes its appearance at the close of the third day, first on the face and hairy scalp, then on the neck, and afterwards spreads over the whole body. Symptoms of cold—as sneezing, coughing, wheezing, and frequently difficulty of breathing, often accompany this disease.

The eruption first displays itself in the shape of small, hard-pointed, red elevations, which can be felt under the skin of the forehead, before it is possible to discover any eruption with the eye which, in about three days, present a bladder-like appearance, surrounded by an inflamed circular margin, and become depressed in the center as they enlarge. About the sixth or eighth day, the watery secretion in the pustule becomes converted into matter, and the depression in the center disappears.

When the pustules are very numerous on the face, it generally becomes much swollen, and the eyelids are frequently closed up. On the first day, a small lump, like a millet-seed, may be felt in each of the elevations above noticed, distinguishing this eruption from all others. The pocks continue coming on during the first three eruptive days, and each pock runs its regular course; thus, those which first appeared are forming into scabs or drying off, whilst the others are suppurating. The drying off commonly takes place on or about the eighth or fourteenth day, according as the pustules may happen to be distinct or confluent.

When the pustules have obtained their full development, they generally burst, in mild cases emitting an opaque, watery discharge, which dries into a crust and falls off; whilst, in severe ones, we find a discharge of thick, yellowish matter, forming scabs and sores, which leave, on their healing, permanent marks or pits. Red stains, caused by increased vascular action, always remain for a while after the eruption; but if no ulceration has taken place, they disappear in process of time.

In Confluent Smallpox, all the precursory symptoms are more severe, the fever runs high, and frequently continues so throughout the course of the disease; the pain in the pit of the stomach and difficulty of breathing are more complained of, and in children the eruption is frequently preceded by convulsions and delirium; the latter symptom, indeed is frequently present with adults, during the suppurative or secondary fever, which not uncommonly assumes a character akin to typhus, and sometimes carries off the patient on the eleventh day. All cases in which we have generally a deeply-rooted morbid constitutional taint to contend against, require the utmost skill of the experienced practitioner to ward off a fatal result. An extensive inflammatory blush of the face or trunk almost invariably precedes the eruption in the confluent variety of smallpox.

*Salivation*, with soreness of the throat and small white ulcers or pustules on the tongue and in the upper part of the gullet, frequently declares itself in both forms of this disease, but more particularly in the confluent.

Before we come to the medicines to be administered in the different stages of the disease, we may say a few words upon the general treatment of the patient.

Cool and fresh air are our best auxiliaries, the emanations from the patient in this complaint being of a nature to react upon the organism, and warmth being calculated to increase its activity. So beneficial is cool air found in this malady, that taking a child to an open window when attacked with the convulsions, frequently present, will generally be found to afford immediate relief. Great cleanliness must also be observed, and the linen frequently changed.

When the vesicles declare themselves, and begin to form into pustules, the room ought to be kept as dark as possible, to aid in preventing the risk of disfigurement, a precaution deducible from common experience, since we find that the parts of the face exposed to the action of light are always those most strongly marked by the ravages of the disease.

To avoid the pits, and consequent disfigurement left by this disease, many physicians have adopted a mask or plaster for the face, of different substances, such as gum, mucilage, calamine, etc. The application of collodion to the face, or of oil when the collodion cannot be tolerated—has been found of service in preventing disfiguration from pock-marks, but the most successful of all means so far employed is that followed by physicians of the Regular Homœopathic school.

#### ALLOPATHIC TREATMENT.

As there are no specific remedies for smallpox, its treatment will be palliative and supporting. If the person has not been vaccinated, this is the first thing to be done after exposure. Five or six points should be inserted in each arm. It is good practice to resort to this in any one whether vaccinated or not, at any time before the appearance of the eruption. It will mitigate, if not prevent the disease. Aside from this, the treatment is the same as in other continued fevers. The room should be large and well ventilated, and all unnecessary articles removed from it, that they may not be infected and act as conductors of the disease (fomites), carpets, curtains, etc. The best disinfectant in this disease is Iodine. A couple of drams should be placed in the vessels which receive the sputa or other excretions, and three drams of the scales may be put in a chip-basket and hung over the patient's bed. If the room is not kept free from smell, the number of vessels containing Iodine may be increased, or a few scales may be vaporized by sprinkling them on a hot shovel.

Carbolic Acid may be used with the Iodine by moistening one or two cloths, a little over a foot square, with a solution of Carbolic Acid in water, and hanging them up in the room, and adding a quarter part of Carbolic Acid to the Iodine in the vessels receiving the excretions.

Chlorinated Lime and Labarraque's Solution, Quick Lime and Potash in solution, are also useful disinfectants, and may be employed on account of cheapness. The nurse should, after waiting

on the patient, wash his hands in clear water with soap, and then wash them in a disinfectant fluid.

Complete isolation is the only real safeguard against a spread of the disease. Destruction of clothing used about the patient, and in the sick-room, is necessary.

During the invasion of the disease, the febrile movement may be lessened by frequent tepid sponging, cool drinks, such as cold water, lemonade or orangeade, or cold barley or rice water.

The writer favors full doses of Quinine, five to ten grains every four hours, until the fever is lessened, and if the pulse be bounding, strong and frequent, Tincture of Aconite may be given in doses of one drop every hour, to an adult, until the fever and pulse are comfortably reduced.

Emetics and cathartics are not to be given, but constipation is to be relieved by injections of warm water, or the mildest laxatives.

During the eruption, and before suppuration, the measures before mentioned are to be continued or not, according to the severity of the symptoms.

Nausea and vomiting will be relieved by five to ten grain doses of Bismuth, with five grains of Oxalate of Cerium, or five-drop doses of Dilute Hydrocyanic Acid, or one drop-doses of Carbolic Acid or Creosote in water every hour, until relief follows. Cold or possibly heat applied over the stomach will aid.

Diarrhœa is to be relieved by Bismuth in ten to fifteen grain-doses in milk, with, if necessary, an opiate, as a deserts- spoonful of Paregoric or ten or fifteen drops of Laudanum.

Restlessness and watchfulness will be relieved by a grain of Opium, and one or two grains of Extract of Hyoscyamus Acid, or twenty grains each of Hydrate of Chloral and Bromide of Potassium, given in solution with sugar, given at bed time. This will insure a night's sleep.

It is to be expected that Dilute Hydrochloric in doses of ten to twenty drops, or Dilute Phosphoric Acid in doses of half a teaspoonful largely diluted in sweetened water, and taken three or four times in course of the day, as a drink, will prove beneficial, as it has done in other continued fevers.

Systematic feeding should be begun in this stage and should consist largely of milk, eggs beat up with sugar and milk, or water (as directed in scarlet fever) strong beef tea or essence, poached eggs or cooked in the shell in hot (not boiling) water, toast, rice and water, simple farinaceous food may be given. The patient should be fed during this stage four times a day, and oftener if there is any appearance of the strength failing, when food, such as milk or eggs should be given at not longer intervals than four hours. Feeding is most important during the suppurative stage. Upon any appearance of exhaustion alcoholic stimulants should be given; from one to three teaspoonsful of brandy or whisky may be given with three or four ounces of milk or egg and water, a couple of hours apart. If the symptoms of prostration increase the stimulant may need to be increased. It is beneficial when it renders the pulse fuller, slower, softer, and regular.



Complications require treatment appropriate to those diseases. Local treatment consists of measures to prevent the pitting and to relieve itching, which becomes intolerable.

For the former purpose the following have been found, in a degree, useful: Careful evacuation of the vesicles with a fine needle; it is a tedious thing to do. Second, after rupture inserting into each vesicle a fine point of Nitrate of Silver. It is claimed to be most successful if done on the second day of the eruption. Third, the application of the Tincture of Iodine twice a day during the papular stage of the eruption. Fourth, exclusion of the light and air by means of a plaster. A mixture of Tannin and Iron is employed in cases in the N. Y. Hospitals. It produces a black mask. Coating the face with Olive Oil and dusting upon the oiled surface twice a day with equal parts of the Sub-Nitrate of Bismuth and prepared chalk. Pulverized Charcoal made into a paste with Olive Oil or Glycerine is a simple application and as effectual as any. Calamine is used in the same way as the pulverized charcoal.

The application of Collodion once or twice daily with a camels' hair brush while the eruption is papular, is said to be successful. It should be begun when the eruption first appears, and acts by excluding the air and compressing the papule. The application of gutta-percha dissolved in Chloroform acts in the same way. These applications are made usually to the face only.

The terrible itching is thought to be greatly relieved by smearing the pustules with cold cream, a mixture of equal parts, by bulk, of lime-water and Linseed or Olive Oil or a mixture of one part of the solution of the Subacetate of Lead to seven parts of Almond Oil.

When the pustules burst they should be dusted and kept coated with Oxide of Zinc in powder, or mixed with pulverized starch. If fissures (cracks in the skin) and excoriations occur a mixture of Oxide of Zinc in Glycerine or Olive Oil two drams to the ounce should be made.

Thorough vaccination at four or five points is an almost sure protection against smallpox and a certain protection against the disease proving fatal. Children should be vaccinated in infancy and revaccinated not later than six or eight years, and still again before childhood passes. When epidemics of smallpox occur all persons who have not been vaccinated within three or four years should be revaccinated.

### HOMŒOPATHIC TREATMENT.

*ACONITUM* may be required in the first, and early in the second stage; if the fever runs high, the thirst is excessive, the skin very hot and dry, the pulse quick, hard and full, and the breathing laborious and rapid.

*Aconite* should also be resorted to as an intermediary remedy, at any stage of the disease, when distinctly indicated by symptoms of this description.

*Dose:* Six pills every two to four hours.

*ANTIMONIUM-TART.*, (*Tartar Emetic*) is well indicated in this disease, from the close analogy which the eruption it is capable of producing

bears to that of smallpox, and may, therefore, be also administered with advantage during all stages of the disease, unless some other remedies should be more urgently called for by the nature of the symptoms; this should be a constant remedy, tightness across the chest, perhaps attended with nausea and vomiting or diarrhoea before the eruption is fully out and the existence of a hollow, sounding cough, with *loud, mucus rattling*, is an additional index for the employment of Antimonium-tartaricum.

*Dose:* Dissolve ten pills in two tablepoonsful of water, and give a teaspoonful of the solution every three hours, until amelioration or change.

CHAMOMILLA is sometimes of great service during the course of the disease in children, when the following distinctive symptoms appear:—difficulty of breathing, with predominant looseness of the bowels, deep green stools, severe colic, tenderness of the belly, and vomiting; it is likewise calculated to be useful during the maturative stage, when much restlessness and whining prevail, and the rest is much disturbed by a troublesome cough at night.

*Dose:* Four pills in a teaspoonful of water, every two hours.

BELLADONNA.—This remedy may follow Aconite or Chamomilla, *when either of the latter have been indicated*, should symptoms of disturbance of the brain have set in, characterized by flushed countenance, intolerance of the eyes for light, headache and delirium, great thirst, nausea and vomiting, or, when there is redness of the tongue at the tip and margins; belly tumid and painful, particularly about the region of the stomach, with sensibility on pressure; prostration of strength and stupor.

*Dose:* Of a solution of four pills to two tablepoonsful of water, give a teaspoonful every two hours.

OPIMUM is useful, when there are symptoms of stupor or strong *inclination to sleep*; it may be employed after Belladonna, or even preferred to the latter remedy, in cases in which there is continuous lethargy, with open mouth, half-closed eyes, and snoring breath; or again, when there is violent delirium, with incessant *tossing about* of the hands.

*Dose:* Six pills carefully placed upon the back part of the tongue, every three hours until change.

#### CONFLUENT SMALLPOX.

ACONITE is indispensable when the fever runs high, and threatens to continue, as it usually does in this more malignant form of the disease; and it will be necessary to diverge even from other important considerations from time to time (having commenced with the administration of this remedy), to return to it for the purpose of effectually acquiring an ascendancy over the fever. The alternate administration of Sulphur is often necessary when the fever does not appear to be the least modified, within two hours after a second dose of Aconite.

MERCURIUS is highly serviceable in confluent smallpox, after the previous administration of two doses of Aconite, as above directed, when the following symptoms predominate:—Inflammation of the eyes, soreness of the throat and nose, offensive breath (salivation), cough, hoarseness,

tenderness of the stomach, excessive looseness of the bowels, *particularly characterized by incessant straining*, and, sometimes, bloody evacuations.

*Dose:* As for Chamomilla.

PULSATILLA is highly useful in confluent smallpox, characterized by the presence of an efflorescence analogous to that of measles, before or during the development of the eruption, especially when nausea or vomiting, and marked aggravation towards night, additionally qualify the general symptoms.

*Dose:* Six pills every two hours.

ARSENICUM should be administered after the second dose of Pulsatilla, (or even of Antimonium-tart. or Ipecacuanha, in the event of neither of the others having proved efficacious), when the nausea and vomiting continue unallayed, especially if the patient complains of *excessive thirst and dryness of the mouth, the tongue being foul and dark, and the prostration of strength severe*.

ARSENICUM is also of great value in cases of a hard type, and when *livid spots* are observed on the skin before the eruption is out, or when—other symptoms corresponding—the scabs are of a dark brown color and very offensive, more particularly if this manifestation be further characterized by intense weakness and languor, thirst, nausea, or vomiting, with more or less severe pain in the region of the stomach,—or, again, when the fever assumes a *putrid typhoid character*.

*Dose:* Six pills every two hours.

CARBO-VEG. should be administered when the eruption assumes a gangrenous appearance; or when the pustules are thin and unhealthy, and the scabs and incrustations are of a dark-brown color, and emit a very offensive smell.

*Dose:* As directed for Arsenicum.

ACIUM-MURIATICUM may be employed with great advantage in cases of a bad type, in which the fever assumes a typhoid character, and when the patient exhibits a continual tendency to sink downwards (towards the foot) in bed.

*Dose:* As for Arsenicum.

CHINA may be advantageously administered against the debility resulting from *profuse diarrhœa or discharge from the pustules*.

*Dose:* Six pills every four hours.

SULPHUR is a useful remedy at the maturity of the eruption, and as the drying process is about to set in; it will often tend materially to forward the total disappearance of lingering traces of the disease, as well as to overcome any latent mischief which has been left to rankle in the system by this virulent disorder. The alternate administration of Rhus at this period will be required, if there be aching pains in the back and extremities, aggravated towards night, but somewhat relieved by motion.

*Dose:* Of Sulphur, singly, six pills (for adults), or for young persons four pills in a wineglassful of water every morning the first thing (fasting), continuing this course for a week; if in alternation with Rhus, give three globules of either medicine in rotation the one six hours after the other, until amelioration or change.

## CHECK OF THE ERUPTION.

**BRYONIA, ANTIMONIUM-TART.**—The administration of either of these remedies, according to special indications, will become requisite when the eruption is checked and the chest is more prominently affected.

*Dose:* Of either remedy, six pills every two hours.

## MODIFIED SMALLPOX.

## VARIOLOID.

This is merely a mild description of the above, and, as we have before said, is the form which the disease generally assumes when it attacks those who have been properly vaccinated. We must regulate our treatment according to the symptoms, being guided in the selection of the remedies by the indications before given.

## COMPLICATIONS AND AFTER-EFFECTS OF SMALLPOX.

We should watch closely, during the progress of the disease, for symptoms of "Inflammation of the Lungs," or of their enveloping membranes (PLEURISY), and the treatment, in cases in which such complications occur, should be regulated according to the directions especially afforded under the head of those particular maladies respectively.

## BOILS, GLANDULAR SWELLINGS, ETC.

Amongst the many severer after-effects of smallpox, we may number glandular swellings and other scrofulous affections, developed by the malignancy of the disease, inflammation of the eyes, boils, etc., which will be most effectually treated by reference to the separate articles devoted to these subjects respectively.

## COUGH.

In this respect the reader is recommended to refer to the separate article on this subject.

## ASTHMATIC AFFECTIONS.

**ANTIMONIUM-TART.** is, in the generality of cases, the most available remedy in cases of this kind, resulting from the smallpox.

*Dose:* Four pills night and morning, until amelioration or change.

## LOOSENESS OF THE BOWELS.

**CHINA, PHOSPHORUS.**—China is, in the majority of cases, more available when there has previously been excessive loss of animal fluids, especially if the symptoms assume an intermittent character.

*Dose:* Six pills in a wineglassful of water daily, the first thing in the morning, until change.

**PHOSPHORUS** is especially adapted for the treatment of blond subjects or of a spare, slender habit of body and fragile frame, when this relaxation continues any length of time.

*Dose:* As directed for China.

**DIET AND REGIMEN.**—In these particulars we should be guided by the virulence of the attack; but, in all instances, the beverages should be



cold, as a warm diet, and neglect of the precautions before mentioned may convert the mild into the malignant form. Whilst the fever runs high, water, or toast and water should alone be allowed; but when the affection is going off mildly nutritious food, such as lean meat, farinaceous food, cocoa, and plain broths, or beef tea, are allowable. In mild cases thin gruel or farinaceous food, in small quantities, may be allowed throughout. Even after recovery in *some cases*, it is necessary that the patient abstain, for a considerable time, from animal food in large quantity.

It should not be omitted, that a plain, nutritious, and even generous diet, taken in small quantities at a time, and at regular periods (when there are no lingering after-effects), combined with regular habits in other respects, and with the bracing effects of the open air, tend greatly to perfect the cure. The general regulations in respect of diet and regimen, which apply to other eruptive fevers, or to fevers in general, hold good with regard to smallpox.

It may be remarked that, after recovery from an attack of malignant smallpox, the patient's constitution often requires a thorough renovation and that he should, therefore, be put under a course of medicine best calculated to attain that result.

#### ACCESSORY MEASURES.

In severe cases, when the pustules are very troublesome, they may be anointed with Oil of Almonds, or gently sponged with tepid water, when they become hard,—or dusted with pure starch, when a thin, acrid, or otherwise unhealthy discharge runs from them. The hair of the head should be clipped, for the sake of the cleanliness and comfort of the patient; and the hands should be muffled, to prevent injury to the pustules from scratching.

#### CHICKEN-POCK.

**SYMPTOMS.**—A disease, bearing a considerable resemblance, in its external character, to smallpox, but differing in its duration, and symptomatically, being considerably milder, generally requiring no medical assistance, but merely attention to diet, and but rarely becoming dangerous, except when it extends itself to the lungs or brain. The fever, however, occasionally runs high.

When this affection attacks an individual, and smallpox is epidemic, which is not unfrequently the case, it is often mistaken for that disorder, but it soon discovers its real character, by the rapidity with which the eruption declared itself, the vesicles (in many instances closely resembling the pustules of the smallpox) being generally fully matured by the third day, and the whole eruption disappearing at the end of the fourth or fifth, without leaving any mark.

#### HOMCEOPATHIC TREATMENT.

**ACONITE** is required when much fever is present.

*Dose:* Of a solution of four pills to two table-spoonful of water, give a teaspoonful every six hours, until amelioration or change.

**COFFEA** is to be preferred when extreme restlessness and anxiety are present without a great degree of fever.

*Dose:* A solution of four pills, as directed for *Aconite*.

BELLADONNA should be given if the brain become evidently affected.

*Dose:* A solution of four pills, as directed for *Aconite*.

ANTIMONIUM-TARTARICUM may be given to accelerate the development of the eruption, when it is slow in making its appearance.

*Dose:* Dissolve six pills in two tablespoonsful of water, and give a teaspoonful of the solution every four hours, until the eruption is thoroughly evolved, and the fever subsides.

MERCURIUS may be given, when the watery secretion of the vesicles becomes converted into thick, yellowish matter, as in the smallpox, and is also beneficial, if strangury be present.

*Dose:* Two pills in a teaspoonful of water, every four hours, until amelioration or change.

#### CHECK OF THE ERUPTION.

This should be treated as directed for smallpox under similar circumstances, (see page 547 ).

Cases, in which this disorder appears with manifestations closely resembling many of those which characterize smallpox, may be similarly treated, according to the particular indications present.

## CHAPTER XXIX.

### EPIDEMIC AND ENDEMIC INFECTIOUS DISEASES.

#### FEVER AND AGUE.

##### INTERMITTENT FEVER.

We have now to enter upon a class of fevers differing essentially from those already considered, in possessing a marked character of their own, in the simplicity of their form, the periodicity of the different stages, (although the periods of fever-fits are not, necessarily, regular), and the uncertainty of their duration; at the same time it may be noticed that one of the distinctive features of intermittent fever consists in the fact that the febrile action does not individually constitute the disease, but appears rather as an occasional development of other morbid processes.

Intermittent fevers cannot be better described than as a compound of acute and chronic disease; *acute* during the continuance of each attack, and *chronic* in the continuance of *liability* to the attacks.

**SYMPTOMS.** These must be classified in three distinctive stages; (1) a chill or cold fit (2) followed by heat, and terminating (3) in perspiration more or less profuse; these three stages constitute a paroxysm; after which, for a certain period, called the *interval* or *respite*, the patient is generally free from suffering. The fever-fits are characterized by the red deposit in the urine.

These periods are generally of definite duration ; but occasionally indefinite and irregular. If the paroxysms return at regular intervals of *twenty-four* hours, the fever is termed a Quotidian,—of *forty-eight*, a Tertian,—of *seventy-two*, a Quartan ; even longer intervals have been observed between the attacks, as that of seven days, which is somewhat inappropriately termed an eight-day intermittent fever. If two fever-fits take place within each period, the ague is said to be doubled; as a double Quotidian, or Tertian, etc.

These fevers are sometimes found existing in the simple form above noted; that is, that each fever-fit (as it occurs) assumes the character of simple fever; in other instances, however, the fever-fits, (as they occur) assume the characteristic features of inflammatory or typhoid fever, or of complications involving the respiratory or digestive functions respectively, etc., etc. The absence of *continuity* or regular *process* to a *crisis* will then identify the febrile symptoms as appertaining to this class *in general*, whereas the peculiar implication of particular organs will qualify the specific character of any particular variety.

They are exceedingly indefinite in duration, and frequently assume a *tediously* chronic form. An individual once attacked with ague, is frequently liable to a return of it in after life, if the disease has not been radically extirpated in the first instance ; nay more, any attacks of disease to which he may afterwards be subjected are peculiarly apt to assume the intermittent form.

Ague is rarely dangerous in this country, except when of long continuance, and then, owing to the weakness which it occasions, and the injury which it inflicts upon the constitution; it may, however, lead to obstructions and indurations of the more important organs, particularly of the liver and spleen, or may induce dropsical affections.

It should not be omitted, however, that the sudden development of *peculiar* symptoms in connection with the fever-fits may be more or less ominous, and should be watched and treated with especial care. Sometimes, however, intermittent fevers appear (as a wholesome crisis) in the last effort of the constitution to expel morbid humors which have long preyed upon the system ; *and in such cases, if treated with due care by homœopathic means* (which will assist in their development), *they will serve to carry off the causes of tedious chronic disorders.*

But in hot climates, or in low, marshy countries, this disease is exceedingly fatal, in consequence of the brain and its tissues, the lining membrane of the stomach and bowels, the lungs, and the investing membrane of the stomach and bowels becoming affected: in such instances, when the disease gains ground, the patient loses strength and becomes emaciated, every fresh paroxysm entails an increase of suffering, and the perspiration fails to relieve; he complains of a sense of weight in the region under the false ribs, particularly the right, with griping pain in the bowels, flatulent distention of the belly, looseness of the bowels or constipation, and constant thirst; or of headache, cough, and shortness of breath; the tongue is furred, and dry at the tip; the skin hot, harsh, and dry; the urine scanty, the belly tumid, the extremities become dropsical, and sleep is restless or broken.

Death may ensue from collapse in the cold stage, from the absence of perspiration, and from the disease passing into continued or remittent fever, or from disorganization of some important part, such as the brain, lungs, spleen, or liver.

We shall now proceed to a general consideration of the three stages of the disease, premising that the various modifications of the symptoms will be found more in detail, under the medicaments, when we enter upon the consideration of the remedial treatment.

#### PREMONITORY SYMPTOMS.

Sense of languor, or general uneasiness; yawning, headache, stupor, pains in the limbs or back; the toes and fingers becoming numb, and the nails blue.

#### 1. THE COLD STAGE (CONGESTIVE STAGE).

Coldness of the extremities, with a feeling as of stream of cold water running down the back, and extending itself to the chest and belly; general prostration of strength, insupportable coldness, external and internal tremors, chattering of the teeth, respiration labored and hurried, with inability to draw a full inspiration, and oppression at the chest. The head is variously affected, sometimes with headache, at others with drowsiness, stupor, or delirium; the pains noticed in the premonitory symptoms are generally present, and, in some instances, the patient complains of pain all over; the tongue is moist, the eyes are heavy and sunken, the features pinched, and the lips and cheeks livid; the rigors sometimes run on to convulsions.

The pulse is weak and oppressed, sometimes slow, at others quick, and frequently intermitting, and often, from the severity of the rigors, scarcely perceptible.

The heat of the body, except at the extremities, is generally above the natural standard, while the patient complains of cold.

Sometimes the patient feels only a slight degree of cold, without tremors, but accompanied with symptoms of functional derangement, and in a few hours the hot fit declares itself. The duration of the cold stage is from an hour to four hours; and it runs into the hot without any marked interval.

#### 2. THE HOT STAGE.

Presents all the characteristics of a modified inflammatory attack, with hot, dry skin, and thirst, oppression at the chest, hurried and anxious breathing, and acute pains in the head, regions of the spleen, liver, etc.; there is also occasionally a degree of disturbance about the brain, or even delirium.

The general duration of the hot fit is from four to twelve hours, when it terminates in the sweating stage; when this does not take place, it is apt to run on to continuous fever, or take the form of a remittent,—a not uncommon issue of this disease in warm climates.

#### 3. THE SWEATING STAGE.

After the hot fit has continued a longer or shorter period, profuse perspiration sets in, commencing in the forehead and extremities, and



quickly diffusing itself over the whole body; as soon as it makes its appearance, the uneasiness and other symptoms begin to disappear, and the patient, in simple ague, continues free from suffering until the next paroxysm.

**CAUSES.** Marshy districts are noted as being the hotbeds of this malady; the presence of stagnant water in the immediate vicinity of dwellings will provoke it; as occasionally, also, conditions which will engender low typhus; the continued prevalence of epidemic disorders may also be cited amongst the causes of intermittent fever; a continuance of fish or farinaceous diet is also apt to produce it; it may, moreover, arise from taking cold, indigestion, internal obstructions, the presence of inactive humors which oppress particular organs, from peculiar constitutional tendency or the like, occasioned by acute diseases, or by difficult chronic affections, or even from purely local irritation.

Nervous or inflammatory fever may change into an intermittent, or the latter take upon itself, if it continue, the character of either of the two former, or become remittent; this frequently happens in hot climates.

#### METHOD OF TREATMENT, PECULIARLY ADAPTED TO INTERMITTENT AFFECTIONS.

The medicines should generally be administered in the interval between the paroxysms, but when these are extremely short, or when they are attended with after-pains of the preceding paroxysms, they should be administered when the sweats, or other concluding features of the attacks, begin to subside.

#### ALLOPATHIC TREATMENT.

The principles of treatment of Intermittent Fever may be briefly given as follows: When there is violent derangement of the functions of the bowels or in cases of long standing intermittents, it is well to begin treatment with a cathartic.

In the former condition a healthy action of the bowels is to restore, and, in the latter case a cathartic unloads from the intestines and intestinal glands the accumulated diseased secretions and leave the intestinal tract, free and active to absorb the anti-malarial remedies.

Two to four Compound Cathartic Pills, or such other laxatives as will move the bowels thoroughly without being severe, may be used equally as well. The calomel has no special application beyond its action as a cathartic.

If, however, there is not time to move the bowels and get the system under the effect of the antimalarial remedies, time ought not to be lost by waiting for the action of a cathartic, but the specific treatment should be begun at once. An efficient cathartic for this purpose is five grains of Calomel with half a grain to a grain of Resin of Podophyllum, followed in six hours by a Seidlitz Powder or a tablespoonful of Citrate of Magnesia or Castor Oil (the Oil mixed with an equal part of Glycerine and flavored with Oil of Cinnamon or Wintergreen).

The remedies which act with complete certainty against this disease are the preparations of Peruvian Bark, preferably the Sulphate of Quinine. The system comes fully under the effect of Quinine in five or six hours after it is taken. It is a point in the proper treatment that sufficient of the remedy be given before five hours of the time of the next expected paroxysm, to thoroughly effect the system. To do this, a safe and effectual plan is to give ten (10) grains of the Sulphate of Quinine as soon as the fever of a paroxysm has passed and another dose of ten (10) grains six hours before the time of the next expected paroxysm. A better effect is obtained by giving with the Quinine on this plan an eighth to a quarter of a grain of Morphine. The Quinine may be given in black coffee, with chocolate and sugar, or liquorice and sugar. One of the nicest ways of giving Quinine is to envelop the powder in a moistened medicine wafer when it is easily swallowed. It may also be given in capsule or in Gelatine or Sugar Coated Pills.

These pills should always be examined before purchasing, by cutting one of them open with a knife to see that the interior is fresh and soft. Quinine is most active when given in solution. This is effected by adding to a mixture of Quinine and water a minim drop of Aromatic Sulphuric Acid or each grain of Quinine. If generally have the acidin excess as in the following prescription: Take of Sulphate of Quinine forty grains, Aromatic Sulphuric Acid one dram, water to make four ounces. Mix. Each tablespoonful contains five grains of Quinine. If this mixture is used chewing a little liquorice or chocolate until the mouth is well coated just before taking the mixture, will mask the taste of the Quinine. If taken in some of the previous ways the efficacy of the Quinine will be increased by a dose of Aromatic Sulphuric Acid two or three times as many drops as there were grains of Quinine taken diluted in sufficient sweetened water to make a pleasant drink.

If sufficient Quinine is taken to produce a ringing of the ears before an expected paroxysm, that paroxysm will in all probability be prevented. Other plans of administering this drug are: in doses of three to five grains from two to four hours apart until the ringing of the ears (called cinchonism) is produced. It is also an effectual plan.

The tendency of the disease is to recur at its regular periodical periods—the third, fifth and seventh days. After a week has passed, the tendency of the disease, generally, is to return every seventh day until three or four septenary (seventh day) periods have passed. It is advisable, therefore, to continue the use of the Quinine in daily quantities of three to five grains, until ten days have passed; but on the seventh day, or late in the sixth day, a full dose of ten or fifteen grains should be taken and every seventh day thereafter until four septenary periods have passed. Even then it is not safe to abandon the use of the remedy unless the patient has become strong and hearty.

It should be remembered that the remedy is just as effective against the next seizure, if given during a paroxysm, as if given during the interval, so that if paroxysms occur with great frequency, no delay ought to be allowed before giving the remedy, but it should be given at once.

If only five to twelve hours can elapse before an expected seizure, twenty grains of Quinine ought to be given in two doses in the latter case, and fifteen or twenty grains in one dose in the former.

Ten grains of Quinine possess a greater anti-periodic effect if given at one dose than twenty grains given in small doses at short intervals during the intervals between paroxysms.

Other preparations of Peruvian Bark are effective, given in the same way, but less so than Quinine. Quinidia, Cinchonidia, Cinchonia, the two latter have the advantage of being cheaper than Quinine. The precipitated Extract of Bark given in double the quantities of Quinine is also efficient, and is very cheap. The Cincho-Quinine is also an effectual remedy, is less bitter than Quinine, and costs about one-third less. The impure alkaloid is comparatively tasteless, especially when mixed in three-fifths its quantity of Tannin—sugar may be added—and taken in powder, dry on the tongue, and swallowed with a drink of water. All these preparations, not taken in solution, should be followed by a dose of Aromatic Sulphuric Acid, as directed above under the directions for Quinine.

When a tonic effect of Bark is needed, the other preparations are generally to be preferred to Quinine. The dose for this purpose is generally two grains three times a day. In case they are used in this way, it is generally advisable to give an anti-periodic dose of Quinine at the weekly periods, as before mentioned.

In all cases where ague has existed for some time, the blood has become impoverished, of poor quality—the patient is anæmic, and requires the use of Iron. It is advisable to give it in connection with tonic doses of some of the preparations of Bark. The Citrate of Iron and Quinine or Cinchonidia, in doses of from three to five grains, generally meets the required indication. The Sulphate of Cinchonia may be given in pill with Iron, as follows: Take of Sulphate of Cinchonia a dram, Reduced Iron half a dram. Make into thirty pills. Take one three times a day. The other Alkaloids of Bark, and the Precipitated Extract of Bark may be used instead of the Sulphate of Cinchonia.

Other Salts of Iron, as the Dried Sulphate of Iron, may be used instead of the Reduced Iron. The Muriate Tincture of Iron is one of the best preparations of Iron in these cases in doses of fifteen or twenty drops given in sweetened water three times a day, or other preparations of Iron may be used alone, in which case the tonic doses of the preparations of Bark should be given separately. In some cases I have found the Citrate of Iron and Strychnine in doses of two or three grains three times a day, a most useful tonic.

Other medicines sometimes have to be resorted to in the cure of ague, from force of circumstances, or other causes.

The one most useful after the preparations of bark is Arsenic. The most eligible form for giving this remedy, is in Fowler's Solution. It is not very suitable as a sole remedy against Ague, but if given for this purpose, the dose is ten or fifteen drops in water, three times a day after meals, when given as the sole cure for Ague. Puffiness of the eye lids

and watering of the eyes may be disregarded, if the stomach or bowels do not become disordered, after a few days—three to five, according to the susceptibility of the patient—the dose should be decreased by two drops each day, until a dose of two drops is reached.

The most important part which Arsenic plays in the cure of intermittents, is in the cure of chronic malarial infections, and to prevent relapses, when the paroxysms are broken up by the preparations of bark. For this purpose it is often combined with Tonic doses of Bark and Iron, as in the following: Take of Quinine a dram, Vallet's Mixture of the Carbonate of Iron, Arsenious Acid one grain. Make into thirty pills according to art. It is advised, however, that the Arsenic be always given separately in the form of Fowler's Solution, (because it may be necessary to suspend its use for a time, when the other Tonics ought to be continued; another reason, the Arsenious Acid may not be properly mixed in the mass, on account of unskillful druggist's, and, serious consequences might follow), and Iron and Tonic doses of Bark given, also, separately. The dose of Fowler's Solution for this purpose, is three to six drops after meals, upon puffiness, or watering of the eyes, or derangement of the stomach or bowels occurring, its use ought to be suspended for two or three days, (until these symptoms disappear), and then began again. Full doses of Quinine should be given at the septenary periods as before directed.

The Sulphate, or Muriate of Berberina and Hydrastis, probably rank next to the preparations of Bark, in the cure of intermittents. The dose of Berberina is fifteen to twenty grains given in Capsules, Medicine wafers or pills on the same plan as directed for Quinine, or in five grain doses every three hours, until twenty grains are taken. Hydrastis, which is really a Muriate of Berberina, may be given in the same way. It may be combined with Iron in pill. Salicin (Alkaloid of Willow Bark), is sometimes successful in arresting the paroxysms. Thirty to forty grains should be given in the intervals. Eight or ten teaspoonsful (even), of common Salt, taken with intermission, will often arrest the disease. Ten drops of Nitric Acid in a glass of sugar and water taken every six hours, will sometimes succeed. The Hydrochlorate of Ammonia a dram between paroxysms, will often arrest the disease. The Carbogelate (picrate), of Ammonia in doses of a quarter to half a grain in pill three times a day, is an old remedy which often succeeds.

Just previous to an expected paroxysm a hypodermic injection of a quarter of a grain of Morphine will often arrest or mitigate it. A full dose of Opium by the mouth is in a less degree efficacious.

During the hot stage cold drinks and cold bathing may be freely indulged in. If any medicines are needed in this stage a half a drop to a drop of Tincture of Aconite may be given every half hour until the pulse and fever is reduced, when its administration should be stopped. Taking the bed before the expected chill, covering the body and keeping it warm with hot bottles has warded off "the chill." A teaspoonful of Chloroform swallowed with mucilage or syrup has prevented the paroxysm.

The difficulty of effecting a cure, especially in chronic cases, is experienced by the patient remaining in the malarious district where he is constantly receiving additional doses of the poison. So that sometimes it is



necessary for the patient to remove to a locality where malaria is unknown.

The best preventive of ague, aside from removal from the malarious district, is frequent doses of Quinine from daily to twice a week of two to five grains each, and the use of iron to overcome the anæmia. The prejudice against taking Quinine for a long time, for fear of injury, is wholly without foundation.

Poisoning by malaria is most apt to occur in the evening, night, and early morning. It is obvious, then, that remaining in the house during these parts of the day is advisable, preferably in an upper room (it is probable that the poison does not rise as high as the second story of a house which is high—10 or 12 feet between joists.) It is also claimed that if the open doors and windows are closed with fine muslin screens from sunset until the dew is off in the morning the occupants of the house are in no danger—the poison cannot pass through these screens.

The enlarged spleen from ague, will generally yield to the remedies which cure the ague. This difficulty is treated of in diseases of the spleen (Chap. XV). The ointment of the Red Iodide of Mercury seems particularly applicable in cases of chronic enlargement. A Belladonna plaster worn over the side generally relieves the pain materially.

The anæmia and dropsy occasioned by chronic ague will be relieved by the tonic treatment recommended to prevent relapses.

In pernicious (congestive or sinking chills) intermittent, no time should be lost in giving an anti-periodic, and nothing but Quinine is to be relied on. Twenty grains should be given at once, by the mouth, or forty grains by injection into the rectum. The dose should be repeated every five hours during the intervals, unless marked Cinchonism (ringing of the ears) is produced. This effect has, in some instances been kept under this effect of the remedy for a long time subsequent; subsequent doses after the patient merges from the paroxysm, will vary from ten to twenty grains. The hypodermic injection of Quinine is sometimes necessary here. From five to ten grains may be given at a dose. Take of Sulphate of Quinine a dram, Sulphate of Morphine a grain, Dilute Sulphuric Acid forty minims, Water one ounce. Mix and filter. A dram contains seven and a half grains. The dose may be repeated, given in this way, in half the time given by the mouth or bowel.

Excessive Cinchonism is not necessary, but promptness and intelligent boldness are necessary for success. Large doses must be given for a longer period than for the milder disease, but the treatment is governed by the same principles.

#### HOMŒOPATHIC TREATMENT.

In the treatment of Ague, the type, although by no means to be held as unimportant, is yet of very secondary consideration to the other features of the malady.

#### PARTICULAR INDICATIONS.

*For the use of Remedies generally called for in Ague.*

CHINA OR QUININE.—This well-known but too frequently abused remedy is undoubtedly of great efficacy in those fevers which owe their

origin to the influence of marsh miasm, and are peculiarly prevalent at particular seasons of the year. It may be given when the fever commences with a sense of languor or general uneasiness of the heart, anxiety, headache, sneezing, great thirst, craving hunger or nausea, and pain in the bowels. It is also indicated when the fever has set in with absence of natural thirst—*during* the cold stage—but thirst is experienced *AFTER* the heat and *during* the sweating, or thirst between the hot and the cold stage, and when the chill and fever are followed by a *copious sweat*. It is *contra-indicated* when thirst exists *during* the hot stage. Turgidity of the veins, with heat in the head, and natural warmth or increased heat of the body, with or without increased heat of the surface. Or, again, determination of blood to the head, commonly with redness and heat in the face, with chilliness of all the other parts of the body, and even external coldness, or only a feeling of internal heat in the face, with coldness of the cheeks to the touch, and cold sweat on the forehead, are further indications for the employment of this remedy. In many cases, China, although not capable of effecting a radical cure, is yet of great utility as a palliative; it should, under such circumstances, be exhibited immediately before the cold stage. In such instances, the consecutive treatment should be adapted to the remaining or supervening symptoms.

*Dose:* Of China. Four drops in a teaspoonful of water every hour in the interval between the fever-fits—the same dose being repeated as long as the symptoms occur in like manner. When directly specific, however, a single dose of this medicine will generally remove the fever. Of Quinine. One grain in the same intervals.

LOBELIA-INFLATA.—This remedy promises to be of equal efficiency with China in the treatment of ague, and may be particularly selected, in many instances, even in preference to China; but in the majority of cases which appear to indicate the latter remedy, when that, however, has been productive of only temporary relief, and particularly when derangement or foulness of the stomach is present.

*Dose:* Of a solution of ten pills to four table-spoonsful of water, give a teaspoonful every three hours, until amelioration or change; or a dose in the like proportions two hours before the anticipated return of the attack.

ARSENICUM is one of the most important remedies in intermittent fevers. It is indicated when the different stages are not definitely marked, but the fever and heat and shivering appear simultaneously—or when we find cold shuddering alternately with heat, or a sensation of cold internally, with heat, or an *imperfect development* of the paroxysms; or burning heat, as if molten lead were coursing through the veins, communicating an unpleasant sensation of heat to the hand, when placed upon the body of the patient; great restlessness; excessive, almost *insatiable thirst*, obliging the sufferer to drink constantly, although but little at a time; depression, *marked prostration of strength* and anxiety; nausea, desire to vomit, retching, and even vomiting; severe and burning pains in the stomach, and insupportable pains all over the body, especially in the limbs. One marked characteristic of Arsenicum is, that all the sufferings of the patient, pains in the limbs, etc., increase in intensity *during* the paroxysm, and others develop themselves; another is, its marked

*periodicity*, generally either Tertian or Quartan, and the rigors generally setting in towards evening. It is therefore called for in these cases, where we meet with a *well-marked periodicity of imperfectly developed paroxysms*, with some or any of the symptoms above mentioned. It is the remedy when large doses of Quinine have been used with no good result.

*Dose*: Six pills in a tablespoonful of water, administer during the interval between the fever-fits, three doses, as often as they continue to recur. Or in cases of the continuance of the cold fit, or of exhaustion so severe that the patient is unable to rally, even during the intervals,—of a solution of twelve globules to three tablespoonsful of water, give a teaspoonful at intervals varying from a quarter of an hour to two hours, according to the severity of the case, doubling the intervals, or suspending treatment as soon as reaction sets in. The 30th potency is best.

IPECACUANHA is usefully employed in the majority of cases of marsh fever, at some stage of the disorder, especially in the earlier periods. Some instances occur in which it is sufficient of itself to effect a cure; in other instances it is most successfully followed by other and appropriate remedies, or coupled with Nux-v. in particular. It is indicated by the following symptoms: much shivering, with but little heat, or *vice versa*; *increase of the shivering by external warmth*; oppression at the forepart of the chest; want of natural thirst, or at least, little thirst; dryness of the mouth, nausea, vomiting, and other symptoms of deranged digestion.

*Dose*: As directed for Lobelia.

NUX-VOMICA is especially indicated by excessive weakness at the commencement of the fever; the shuddering mixed with or immediately followed by heat; warmth of the cheeks, with internal chilliness; feeling of heat in the face, with shuddering in the remaining parts of the body; heat in the head, with coldness of the body; burning pain in the eyes; or, giddiness, with feeling in the head as if from intoxication, desire to lie down, with trembling of the limbs; fainting, or a sensation of paralytic weakness and prostration, with cramps in the different extremities, particularly the calves of the legs and feet; difficulty of breathing, palpitation of the heart, anxiety, irascibility, fear of death, and even violent delirium; derangements of the alimentary organs, such as want of appetite; dislike to bread; bitter and sour eructations, tension of the belly or spasms of the muscles in that region, and constipation; burning, itching miliary eruption, and burning itching sensations over the whole body. *During the fever*: coldness and blueness of the skin, desire to be constantly covered, even during the access of heat and perspiration; occasionally stitches in the side, shooting pains in the belly, aching in the back and limbs, and *dragging* pain in the belly during the rigors. During the *hot fit* particularly: headache, buzzing in the ears, heat in the head or face, with redness of the cheeks, and thirst.

*Dose*: As for Lobelia.

PULSATILLA, like the two medicines last mentioned, is an excellent remedy in Agues complicated with the stomach or bilious symptoms, whenever the slightest attack of indigestion brings on a relapse. Its more peculiar indications are vomiting of phlegm at the commence-

ment of the cold stage; want of natural thirst, all through the fever, —or thirst, *only* during the hot fit; simultaneous heat and shivering—aggravated *in the afternoon or towards evening*; shivering when uncovered; anxiety and oppression of the chest during the shivering. *During the hot stage*, redness and swelling of the face, or redness of the cheeks only, and perspiration on the face. The presence of diarrhœa, and the patient being of a mild disposition, are corroborative indications for its employment.

*Dose:* Six pills every four hours.

ANTIMONIUM-CRUDUM. The indications for this remedy closely resemble those of Pulsatilla, but it is particularly called for, when the *perspiration breaks out simultaneously with the access of heat and then suddenly disappears leaving the skin dry and hot.*

*Dose:* Four globules in a teaspoonful of water, as directed for Pulsatilla.

BELLADONNA. Severe headache, with giddiness, or heat and redness of the face, pulsation of the large blood-vessels of the neck, and excessive aggravation of pain from meditation; partial shivering and shuddering, with heat in other parts; great heat with slight shivering; or violent shivering with moderate heat; absence of natural thirst, or, on the contrary, intense thirst; extreme susceptibility, tearfulness, or depression of spirits, and desire for death, particularly when the sufferings are at their height.

*Dose:* Four pills in a teaspoonful of water every three hours during the first interval which occurs after treatment has been undertaken and afterwards at lengthening intervals.

IGNATIA is indicated, when, with heat of some parts of the body, there is coldness, chill, and shuddering of others; also where the heat is only external. Its best characteristic is, when the chills are *easily relieved by external warmth, and attended with thirst.*

*Dose:* As for Bryonia.

APIS. Violent headache, amounting almost to unconsciousness; pain in the limbs and all over the body, thirst more during the heat; sensitiveness at the pit of the stomach; scanty urine and swollen feet. Chill about 4 P. M.

*Dose:* As directed for Ignitia.

NATRUM-M. is especially advantageous, for cases which have been mismanaged with excessive doses of Bark or Quinine, particularly as follows:—Ague-fits, commencing with headache, general aching pains, predominant or prolonged shivering, great thirst during the hot-fit, and nearly to the same extent during the cold stage; also dryness of the mouth and tongue; tenderness of the pit of the stomach to the touch; bitter taste and loss of appetite; debility; sallow complexion; soreness of the corners of the mouth.

*Dose:* Six pills in a teaspoonful of water every four hours, the first interval after treatment is undertaken, and three hours before the return of every attack, until amelioration or change; and afterward at longer and longer intervals.



CARBO-VEGETABILIS is particularly indicated, when throbbing at the temples, aching in the teeth, and in the bones of the extremities, and the coldness of the feet precede the paroxysm; when thirst is present *only* during the shiverings, and there are rheumatic pains in the teeth or limbs before or during the attack; or nausea, giddiness, and redness of the face during the hot-fit; further, when an intense, burning pain, occupying the prominent part of the forehead and the eye on the right side accompanies the fever. Where Quinine has failed, this is another *excellent* remedy.

*Dose:* As for Natrum.

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## INFLAMMATORY FEVER.

### SYNOCHIA.

DIAGNOSIS.—Rigors (chills) — generally considerable—followed by burning heat; pulse strong, hard, and greatly accelerated; dryness of the skin, mouth, lips, and tongue; the latter generally of a bright red, in some cases slightly coated with white; thirst; urine red and scanty; constipation; respiration hurried in accordance with the pulse; amelioration of symptoms as the pulse assumes a more normal state. It runs its course with rapidity, rarely exceeding fourteen days, and progressing with regularity to a crisis, which shows itself in profuse perspirations, diarrhoea or hemorrhage, principally epistaxis (nose bleeding.) The period mentioned is its ordinary period of duration, but under careful treatment the perfect crisis is considerably hastened and without the long convalescence entailed by the usual heroic antiphlogistic treatment.

It is peculiarly apt, if not carefully treated, to change to typhus, or, by metastasis, to fix upon some important organ.

CAUSES.—Sudden chill, or check of perspiration, exposure to wet or damp winds, or dry, easterly winds, *violent* emotions such as grief, joy, *anger*, etc., high living, external injury, local inflammations, and from slight attacks of fever mismanaged.

Individuals of what is termed a plethoric habit are particularly subject to this disease; it mostly attacks between the ages of fifteen and thirty years.

Under *diagnosis* we have just now given the symptoms usually present in Synochia; we, however, find it complicated in many cases with cerebral (brain) disturbance which you will find more fully considered under INFLAMMATION OF THE BRAIN.

### HOMŒOPATHIC TREATMENT.

When the symptoms above described are present give at once a dose of Aconite, every two to six hours according to the intensity of the fever. The pulse should be carefully watched and also the appearance, first, of simple moisture of the skin, and afterward, of copious sweating, which generally takes place after a few doses of Aconite. The intervals between the doses must be lengthened as soon as this favorable change takes place.

A slight degree of delirium is frequently present in this affection, chiefly at night, which—unless it threatens to run on to inflammation of the brain, in which case Belladonna must be given—Aconite of itself is sufficient to subdue. When, however, during the course of the disease, other important symptoms besides those mentioned develop themselves, different remedies such as Bell., Bry., etc., must be given.

BELLADONNA is especially useful after the previous employment of Aconite; but it may also be employed at the commencement of the attack in all cases where the cerebral (brain) system seems most prominently affected, and there is *great heat in the head*, with violent headache, particularly in the *forehead*, and redness of the face; *distention of the arteries of the temples*: nocturnal sleeplessness, with furious delirium; eyes red, shining and fiery; general internal and external heat; burning thirst and agonizing restlessness.

BRYONIA.—When the state of excitement is chiefly confined to the organs of the chest (thoracic viscera) or when there is gastric complication and the fever inclines to degenerate into typhus.

This medicine is accordingly indicated when, in addition to the usual symptoms of inflammatory fever already given, we find a heavy, stupefying headache, with a sensation as if the head would burst at the temples, much aggravated by movement, *vertigo and giddiness on rising up or moving*, *burning heat of the head* and face, with redness and swelling of the latter; delirium; *oppression at the pit of the stomach*; excessive thirst, sometimes followed by vomiting; *constipation*; aching or shooting pains in the limbs, short cough, oppression of the chest, and laborious breathing.

A dose every three to six hours, according to the urgency of the symptoms.

CANTHARIS is good in irritative fever, especially when the following symptoms are developed: the fever is very intense during the night, and is accompanied by burning of the skin, strong accelerated pulse, general redness of the surface, dryness of the mouth, and violent thirst. Further, when pains are complained of in the right side of the body, attended with great anxiety and raving.

CHAMOMILLA is best when the attack is brought on by a fit of anger or vexation; present burning heat and bright redness of the cheeks, tremulous, anxious, palpitation of the heart, extreme irritability of temper, and over-sensibility of the senses, alternate chill and heat and sometimes spasmodic attacks. A dose or two of Aconite is generally needed in the beginning.

When *inflammatory fever* seems to arise from a primary inflammation of some important organ, such as head, lungs, liver, stomach or bowels, the appropriate treatment will be found under the title "Inflammation of Head, Lungs, Liver," etc.

BRYONIA is indicated by headache and giddiness, with dry heat preceding the attacks of shivering; by the predominance of cold or shivering, with redness of the cheeks, heat in the head, and headache; or marked heat, followed by shivering; by stitches in the side, excessive

thirst, thickly coated tongue, bitter taste in the mouth, disgust at the sight of food, nausea or vomiting, and constipation, especially in cases occurring in the spring.

*Dose:* Six pills in a tablespoonful of water every morning, or as nearly at that period as possible, *during the interval between the attacks.*

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## TYPHOID FEVER.

### TYPHUS.

#### *Enteric Fever.*

Typhus occurs in two forms that do not differ much from each other, namely: abdominal typhus and exanthematic typhus. More recently this last-named form has become much less frequent than the former. In spite of these differences, the etiology of both forms is pretty much the same; up to this period we have not succeeded in discovering the reasons for the appearance of either one or the other form.

Typhus originates in some infectious agent; all that is known of this agent is: that it is caused by the decomposition of animal substances. Hence, typhus occurs most frequently where the decomposition of animal matter is most favored by circumstances, namely: in large cities and hospitals; likewise in localities which are least favorably situated for carrying away the products of decomposition, such as cities built in a flat country and with imperfect drainage. The infectious principle at times seems to act with great intensity; at other times very mildly, so that typhus in crowded localities sometimes breaks out with an extraordinary virulence; and other times with comparative mildness. According to all probability, a graduated difference of this kind is chiefly owing to the quantity of the infectious agent that acts upon the organism, not to its quality. The contagion is reproduced by the patient. We cannot share the views which prevail concerning the formation of a contagion. We do not consider any form of typhus contagious. An apparently contagious transmission of typhus only takes place among those who have been for some time exposed to the emanations from the infected individual, not among those who have only been in contact with the patient for a short period of time. These remarks apply to exanthematic typhus which is considered as decidedly contagious, but which only appears so for the reason that it produces a larger quantity and a more infectious quality of contagious matter. Physicians in private practice are seldom attacked, notwithstanding they are brought in closest contact with the patients when exploring their chests; hospital-physicians and nurses, on the contrary, are taken down very often. More recently the level of the surface-water has been more particularly examined with reference to typhus and cholera; a high level is supposed to favor the breaking out of these plagues. We are still without any reliable data in this respect. In large cities the construction of wells and water-closets deserves great attention; where both are so close together that the well-water can be contaminated by the contents of the closets, typhus is very likely to occur.

This subject is, without doubt, worthy the most serious attention of the Board of Health, for typhus is not only one of the most dangerous, but likewise, one of the most frequent diseases.

A few points can easily be inferred from what we have said, such as : epidemic and endemic, slightly endemic and sporadic type of typhus ; breaking out of typhus in very damp and hot years, during the hot months of the summer and in the fall ; likewise in crowded hospitals, more particularly if they are full of wounded soldiers ; or in densely populated streets, tenement-houses, on ship-board, etc. Typhus occasioned by an insufficient supply of food, or by unwholesome and deteriorated food, is less easily accounted for.

One attack of typhus does not always, but very generally, protect against a second attack. There are certain other circumstances that almost positively preclude the possibility of typhus, especially abdominal typhus ; these are : Intermittent fever, consumption, cancer, heart-disease of the higher grade. Age does not establish any positive lines of demarcation ; except infants, persons of any age may be attacked, but more particularly young people and individuals up to the age of fifty. Vigorous constitutions are more easily attacked and likewise more severely.

Exciting causes are : Fear and anxiety ; a sudden change of diet, when persons settle in a locality where typhus is endemic ; catarrh of the intestines ; mental depression, both by excessive mental labor as well as by care and grief.

SYMPTOMS AND COURSE.—We deem it unnecessary to analyze the pathological anatomy of typhus, for the reason that the prominent post-mortem phenomena scarcely ever correspond with definite groups of symptoms in the phenomenal totality of the disease. Hence, we confine ourselves to a few more important data. In abdominal typhus the ulcers in the intestines act the most important part ; they have even given rise to the name of this form of the disease. However, it behooves us to premise the statement that in their various phases these ulcers do not correspond with definite phases in the total course of the disease.

Except these two almost constant phenomena, typhus does not offer any permanent, characteristic signs. The brain, especially, remains unaltered ; the lungs, on the contrary, show at first symptoms of irritation ; afterwards pneumonia. During the first weeks of the disease the muscles have a somewhat characteristically dark color, and the internal surface of the arteries has likewise a dark-red appearance. In exanthematic typhus the intestinal ulceration does not exist, whereas in this form likewise the spleen is considerably hypertrophied and softened and the vessels also have a bright appearance as if injected.

Abdominal typhus very rarely breaks out suddenly ; it is generally preceded for a few days or even a week by indefinite symptoms, such as lassitude, indisposition to work, loss of spirits, impaired appetite, very seldom hunger almost bordering upon a voracious desire for food ; wandering rheumatoid pains in the limbs, especially in the back, headache of the indeterminate type, sleep full of dreams.



The disease is generally ushered in by a chill of moderate violence, or by a marked fainting sensation which is soon followed by the characteristic feeling of illness, namely: an inability to stand erect or move about, and a desire to lie down. Very seldom one of these conditions is entirely wanting, so that it is difficult to point out the real beginning of the disease; instead of one severe chill we often meet with a succession of very feeble chills. The disease now develops itself in the following manner: The patients feel weak, have neither the strength nor the desire to rise from their beds; headache, at times more frontal; and at other times, in the more violent cases, in the occiput, throbbing and very distressing; complete loss of appetite; altered, generally pasty taste; vomiting not very frequent; bowels quite torpid in the first week; restless sleep; when waking early in the morning, the patients commence very soon to complain of phantasms which they cannot avoid; yet they talk very rationally and are perfectly conscious of seeing phantasms. The pulse is generally full, very seldom exceeding one hundred beats, very often dicrotic (double, or rebounding), the temperature is high, the skin feels burning hot. The breathing is almost constantly hurried, anxious, the patient talks hurriedly, yet is able to take a long breath. The spleen is generally swollen, the swelling increasing rapidly in size, and is not unfrequently painful. The abdomen does not show any constant alterations, but when pressed upon, the patients complain of pain in this region, and a gurgling sensation is communicated to the finger, with which the pressure is made. The tongue is at times coated very thickly, at other times it only has a whitish coating, and again it looks quite clean, but the coating changes as the disease progresses. Sometimes the patients complain of a little hacking cough, and exhibit symptoms of a slight bronchial catarrh. The urine is less in quantity, saturated, notwithstanding that the patients often experience a very violent thirst. All these symptoms remain in force only in very violent cases; most generally a sensible remission of these symptoms takes place towards the end of the first week.

SECOND WEEK.—In the second week the symptoms of the disease undergo a marked change, unless the morbid process takes a turn towards recovery, which is very seldom the case. For the present, we only speak of typhus of a moderately severe type. In this stage, the patients lose their consciousness more and more; they are either lying in a state of lethargic apathy, or else it is only with great difficulty that they are able to reply to questions or to give utterance to their own ideas. In the evening and during the night this soporous prostration is generally interrupted by a state of nervous exultation, during which the patients manifest their internal nervousness by animated talking or by a constant endeavor to escape from their beds. Sensations of pain now cease entirely; when asked how they feel, they answer: "Quite well;" they express no desire for drink, but they swallow the offered beverage hurriedly and greedily; when repeatedly asked to do so, they put out their tongues slowly and tremulously, and forget to draw them in again.

Another evidence that the influence of the brain is almost entirely suspended is, that the patients persevere for a long time in an uncom-

fortable position, and that they allow the urine and feces to escape into their beds.

At the beginning of the second, and very frequently already at the end of the first week, the patients complain of a violent buzzing in the ears, afterwards they are evidently hard of hearing. Corresponding with these changes, the countenances of the patients become altered. Although the complexion seems to shine, yet it has a livid hue; the eyes stare, or they have a vague and unsteady expression; when raised in their beds, the patients at once turn pale and look as if they would faint. The various functions show the following deviations from their normal condition: The pulse is seldom below 100, nor is it often above 120, it is weaker than usual and sometimes dicrotic. The tongue, which already showed a good deal of dryness in the first week, now is constantly dry; the streaked coating, which had marked it hitherto, now vanishes; it shows a peculiarly red color, and the papillæ seem to have become effaced; towards the end of the second week the tongue appears covered with a brownish incrustation. The appetite is entirely wanting, yet the patients will taste of what they are offered to eat. They do not seem thirsty, yet they drink greedily the proffered beverage. At this stage the abdomen begins to bloat quite considerably; when the ilio-cæcal region is pressed upon very hard, the patients distort the corners of their mouths. Diarrhœa now usually sets in, from four to eight passages taking place involuntarily every day. They have a yellowish color, deposit a sediment of thick consistence over which floats a watery, opalescent substance. The urine is secreted in smaller quantities, it is dark and is frequently voided involuntarily; sometimes it is retained altogether, so that the bladder becomes very much distended. The respiration is still accelerated, yet the peculiar hurried breathing of the first week is scarcely yet perceived; catarrhal symptoms are likewise discovered, although the patients scarcely ever cough and only rarely brings up a tenacious, yellowish mucus. The spleen continues to enlarge, although owing to the distention of the bowels, and the consequent displacement of the spleen upwards, the enlargement cannot well be discovered by examination. Upon the abdomen, thorax and back, roseola-spots break out in greater or less number, some of which are usually present at the end of the first week.

About the middle of the second week all these symptoms generally show an increase, less frequently a remission; both the increase and the remission are, however, of short duration.

**THIRD WEEK.** In the third week, especially at the commencement, the symptoms continue to increase in intensity. The patients are now lying in a state of complete apathy; in the day-time they are only slightly delirious, but during the night the nervous exaltation is much worse, attended with grasping at flocks. The prostration is so great that the patients are no longer able to sit erect; they are constantly lying on their backs, and the body, yielding to the law of gravitation, settles from the pillow downwards towards the middle of the bed. The tongue is only slowly protruded after loud and repeated requests; it is quite dry, with a brownish coating which is likewise exhibited on the teeth and at the

nostrils. Deglutition is very difficult, and it is only with a great effort that the patient is able to swallow very small quantities of liquid at one time. The diarrhœa continues, but the passages are generally less copious, and not unfrequently tinged with blood. The urinary secretions continue to decrease and paralysis of the bladder is not an unfrequent occurrence. The abdomen is greatly distended and is no longer sensitive to pressure. The other symptoms continue unchanged, except that the roseola-spots pale off and become complicated with miliaria (measle-like) and sometimes with ecchymoses (black-like bruised place). Bedsores are now very apt to torment the patient. Evacuation proceeds very rapidly and the whole appearance is that of a general collapse. Up to the middle of the third week, the fever maintains its intensity. In cases where the disease continues during the fourth week no remission of the fever is perceptible. *In most cases*, however, the *seventeenth day* is characterized by a sudden abatement of the fever and of most of the other derangement of the functions. This improvement at times is only apparent, as in a few hours the symptoms again exacerbate; but at other times it is a real improvement marking the beginning of recovery. If the patients die, it is most generally at this period; the remission just alluded to, when followed by exacerbation of the symptoms, is generally looked upon as a fatal change. Death takes place with symptoms of paralysis of the heart and lungs. In favorable cases the fever remits every morning on the last days of the third week, whereas the evening-exacerbations decrease in violence, the consciousness returns gradually and with it a desire for food and drink. At this stage the fever scarcely shows a sudden and considerable decrease, with a correspondingly sudden beginning of convalescence.

With the third week typhus of a medium grade has reached its intensity in so far as signs of convalescence now begin to show themselves, although very slowly. Every case of typhus out-lasting the third week, may be safely regarded as very severe. Except complications take place, no new symptoms develop themselves during the fourth and fifth weeks. The remissions of the fever are very distinct and grow more decided in character; the pulse, on the contrary, increases in weakness and frequency. The patient looks as if he were in a state of terrible collapse; occasionally threatening paroxysms of collapse really take place, more particularly in the night; in the latter course of the disease, such paroxysms are, however, not as dangerous as they seem. In the case of adults the consciousness usually returns towards the end of the fourth week; but, if the fever continues, delirium is still very frequent towards evening. The diarrhœa is at times less than it was, and at other times more profuse; in some cases it now ceases altogether. The skin looks clean, with the exception of miliaria here and there. The bed-sores which are never wanting during such a protracted course of the disease, grow rapidly in extent and malignancy.

If the fever runs a course of four weeks, recovery takes place very slowly. In very fortunate cases recovery goes on uninterruptedly, but most frequently its course is disturbed by all sorts of accidental inconveniences, such as vomiting after certain kinds of food, or even after any

kind; sudden disappearance of the appetite that had just begun to return; return or protracted continuance of the diarrhœa; exacerbations of the fever. The decubitus, the nature and conduct of which afford an excellent criterion by which the amount of progress in the recovery of the patient can be measured, sometimes causes a great deal of serious trouble, provided the final cure of the fever is very much delayed. Death either takes place in consequence of the utter prostration of the patient, from exhaustion, or from sudden and complete overpowering of the whole of the vital powers of the system.

#### ALLOPATHIC TREATMENT.

The first requisite for the proper treatment of typhoid fever is, that the patient shall be in a large room, ventilated by means of several windows, that the air may be constantly changed by the free entrance of pure fresh air. Disinfection should be constantly practiced.

The generation of Ozone (active oxygen) constantly in the sick room, is very beneficial. This is best done by a mixture of two parts of Permanganate of Potash and three parts strong Sulphuric Acid in a broad, open vessel. An invigorating quality is imparted to the atmosphere of the room, and is especially beneficial when, for any reason, the room cannot be freely open. Dry scales of Iodine, in a chip-basket, hung over the bed, and placed in saucers in different parts of the room, are valuable in removing any unpleasant odor in the atmosphere. A few of the scales may be vaporized, occasionally, by sprinkling on a hot shovel.

Another available disinfectant is Carbolic Acid; a few drops may be put on wetted cloths which are hung up in the room. The floor may be occasionally sprinkled with Labarraque's Solution (Chlorinated Soda)

The vessels which are to receive the excretions should always contain a little of the Solution of Chlorinated Soda, Permanganate of Potash, or Carbolic Acid, five or ten drops in water.

It is needless to remark that carpets, curtains, and all unnecessary articles, ought to be removed from the room.

The proper temperature of the room is 60°.

The bed linen should be changed daily. As soon as it is determined that the patient has typhoid fever, the hair should be shingled.

The most effectual plan for controlling the temperature is, by the use of water. Where there are proper facilities for it, the bath is the surest and most efficient method for reducing a high fever. The patient should be placed in the bath at a temperature of 98° F., and the temperature of the water lowered to 80°, or to 60°, by the addition of ice or ice-water.

After a time varying from five minutes to half an hour, a marked reduction of the temperature is produced, as shown by a thermometer placed in the rectum (bowel), when the patient is removed from the bath, wiped dry and placed in bed. For this is necessary a bath-tub, large enough to receive the body, provided with a discharge pipe to convey off the extra water, a strong sheet to lift the patient, a thermometer to test the temperature of the bath, and a fever thermometer to ascertain the amount of reduction in the heat of the patient.



The most suitable method of applying water in private practice, and in families, is, by the use of the cold wet pack. A sheet is wrung out of cold water and placed on the bed. The patient is then laid on the sheet, with a proper support for his head. Each side of the sheet is then brought over the patient and tucked under the opposite side. The legs are well wrapped in, and the patient is well covered with blankets. He may remain in the pack from ten minutes to an hour. The pack may be repeated several times a day, the frequency being determined by the rise of temperature. When taken from the pack, the patient is to be wiped dry.

An agreeable, but less effectual plan, is, cool sponging and having the cloths dipped in cold water and laid upon portions of the body.

When there is any tendency to collapse, wet baths should not be given. There can be no doubt of a greatly diminished mortality by the use of cold baths, the disease pursuing a milder course under their use.

If, in the use of water, the circulation becomes feeble, the skin blue or the extremities cold, stimulants should be given, and bottles of hot water placed at the feet.

The use of the mineral acids is of marked benefit in this disease by aiding the gastric secretion and improving digestion and in increasing the mucous secretions, and relieves somewhat the dryness of the tongue. The Dilute Hydrochloric (Muriatic) Acid is as applicable as any given in doses of ten drops diluted in water sweetened with simple Syrup or Syrup of Orange Peel. It seems better suited to aid digestion.

If the teeth become set on edge it is well to wipe them off after each dose of the Acid with a cloth wet with a solution of Bicarbonate of Soda. This will do much toward preserving the teeth from the injurious effects of the Acid. In case of apparent exhaustion of the nervous system the Dilute Phosphoric Acid may be given in doses of ten or fifteen drops every hour or two, properly diluted and sweetened. It is given habitually by some physicians in this disease. It is conclusive that the use of the Acids diminish the mortality of the disease very greatly, besides being very grateful to the teeth.

The patient may also drink freely of cold water or iced water, barley or rice water acidulated with lemon or orange juice; the only limit necessary to be observed is that the amount taken does not derange the stomach.

In view of the fact that typhoid fever is a self limited disease, the essential element in the treatment is to support the powers of life and keep the patient alive until the disease shall disappear. The means for this purpose are food, (nourishment) alcoholic stimulants and tonic doses of Quinine.

Regarding the nourishment of the patient it is important that systematic feeding be begun early in the course of the disease and continued throughout. In the beginning of the disease but very little food will probably be taken, owing to a repugnance to it, but if liquid food is given cold the patient will often take it to relieve his thirst, and in this way enough nourishment will be taken to maintain the strength. It should not be given to the extent of producing vomiting or a feeling of discomfort from

over-fullness or indigestion. The forms of food best suited for fever patients are milk, strong beef tea or essence, and fresh raw eggs beaten with a teaspoonful of sugar and half a cup (four ounces) of water or milk. Further on in the disease there is an indifference to food, but if it is given it is digested; it should be regularly given. If only about four ounces of milk, beef tea, or egg and water or milk are taken at a time, it should be given every two hours. If an ordinary drinking glass full (eight ounces) is taken at a time, four hours should be the intervals of taking food. If the patient expresses a desire for any particular kinds of food, the wish should be complied with, as far as possible.

It is a good rule, however, not to give solid food when there is diarrhœa. With the three articles mentioned, sufficient nourishment may be given. In making beef tea a pound of finely chopped lean beef will make a pint of strong tea. A pint of cold water is poured upon the beef and brought to a temperature not above 160° F. and kept at that point for four hours, a little water being added from time to time to supply the loss from evaporation. (The Hydrochloric Acid previously directed can be given in the beef tea.) Mutton or chicken can be used instead of beef. Finely divided lean beef pounded in a mortar until the nutritious elements are separated from the fibre may be given. Nothing excels a milk diet. Everything else should, as a rule, be supplementary. By early and continuous feeding the severer symptoms are generally obviated as they generally depend on the exhaustion and prostration, which is prevented by nourishment.

In the course of the disease, if severe, Alcoholic stimulants are almost always required. They should be given from an early period in the attack, as aid to digestion, a teaspoonful to a dessertspoonful of Whisky or Brandy with each half glass (four ounces) of milk or other liquid food, but not oftener than two hours, greatly aids in the feeding of the patient, and so prevents, in many cases, the innutrition and its results, which is shown by delirium, a rapid, feeble pulse, twitching of the muscles, picking at the bedclothes, coma with watchfulness, restlessness, etc. In a stage of this fever where there is marked exhaustion, Brandy or Whisky should be given freely and to the extent of relieving the symptoms above enumerated. I believe life is saved by the free but judicious administration of Alcohol in the advanced stage of prostrating diseases in obedience to the scriptural injunction, "Give strong drink unto him that is ready to perish." The appropriate dose will be from one to two tablespoonsful of Brandy or Whisky, given from one to four hours apart. The stimulant is doing good when the weak, rapid pulse becomes stronger, slower, fuller (a pulse of 120 is generally a weak pulse; one of 130, or more, always so), when the dry tongue becomes more moist, the delirium, vigil, restlessness, etc., lessened and the sleep becomes more refreshing. It does harm if the pulse is quickened, the tongue dryer, the delirium greater, the restlessness increased and is being given too freely.

The tonic effect of Quinine is best produced by doses of two or three grains four times in the twenty-four hours.

In the early part, headache may be relieved by cold water, either by keeping a thin cloth on the head, which will keep cool by evaporation, or by the use of ice-water, vinegar and water, pouring water upon the head (douche), or by bladders of ice.

Vigil (or wakefulness), sleeplessness, or delirium should be relieved. For this purpose there is nothing better than ten grains of Dover's Powder, or a grain of Opium with a grain of the Extract of Hyoscyamus, at night, which will produce a refreshing sleep. A condition of semi-coma (insensibility) with watchfulness, does not prevent the use of Opium to produce sleep. It is, sometimes, better to give at night, especially when there is delirium, twenty grains of Hydrate of Chloral with an equal quantity of Bromide of Potassium, dissolved in water with syrup.

Nausea and vomiting are generally relieved by greater care in giving food and drink, especially a more limited amount of the latter. Cold or Mustard may be applied over the stomach. Ten grains of Bismuth, Sub-Nitrate, with five grains of Oxalate of Cerium, or a drop of Carbolic Acid in water, may be given hourly, if needed.

Diarrhoea is generally present, and may require to be restrained by opiates and astringents, directed in the treatment of that disease. Sometimes a large injection of thin Starch will suffice. Merely a looseness of the bowels does not need treatment.

Cathartics are not to be given; but if constipation exists, it is to be relieved by injections or mild laxatives, as a dessertspoonful of Castor Oil in emulsion with Glycerine, flavored with Oil of Wintergreen (*Gantheria*) or Cinnamon.

Should ulceration of the intestines occur, a peritonitis or a hemorrhage is almost sure to occur. The former result is to be treated by full doses of Opium, to relieve the pain and support life. Large, warm poultices should be kept on the abdomen. Peritonitis not caused by ulceration, is not so fatal, but is to be met by the same means.

Hemorrhage into the intestines will call for Opium in doses of a grain with ten grains of Gallic Acid, in solution, with ten drops of Aromatic Sulphuric Acid.

Nose-bleeding, if excessive, will call for the treatment directed in the article on that trouble.

The distention of the abdomen from gas in the intestines (called tympanites) occasions great discomfort. It may be relieved by a large injection of warm water containing a tablespoonful of Turpentine previously mixed with Glycerine. A flannel cloth wrung out of hot water and then wet with Turpentine, laid over the abdomen, will afford relief.

The urine should be examined frequently to ascertain whether a deficiency in the amount of urea may not warn of Uræmia (poisoning by this ingredient of the urine remaining in the blood.) The smell of Ammonia in the expired breath also indicates Uræmia. Diuretics (medicines to act on the kidneys) are required, as, a half a teaspoonful of Vinegar of Squill in a tablespoonful of Infusion of Digitalis every four hours until urine is passed freely, and if the symptoms are urgent, hot air baths should be given. Profound sleep (coma) will call for these measures for relieving the blood of urea, and blisters to the back of the neck, by means of Blistering Collodion.

#### DIVISION AND TREATMENT.

It were of no service, as it would also be a difficult task, to define exactly the varieties of complication which may attend disorders of this

kind. The broad distinction consists in the organs which are especially affected.

But, in order to facilitate the discrimination of unprofessional persons in the treatment of this most difficult species of disorders, we will divide their indication, progress, and issue, into three distinct stages, the Premonitory and Incipient, the Acute, and the Debilitated and Convalescent stages. It is not, however, to be assumed that these gradations are always clearly defined. They may merge imperceptibly, may be arrested by treatment, or may be suspended by fatal results. The incipient stages are, however, naturally distinguishable until the positive development of the fever becomes evident, and the stage of debility, which is a consequence of the ravages of the fever, differs from the two former in the substance of active symptoms, and in the accompanying prostration of animal power. In the treatment of all alike we must be guided by the symptoms, and select the most appropriate remedy according to the characteristic indications afforded.

### HOMEOPATHIC TREATMENT.

#### DURING THE PREMONITORY AND INCIPIENT STAGES.

**BRYONIA-ALBA. RHUS-TOXICODENDRON.** These remedies, either singly (according to the subjoined symptomatic indications of each), or in alternation (where the symptoms of the disease embrace the characteristics of *both*), have, when seasonably administered in the incipient stages of many varieties of these fevers, been found sufficient to arrest the progress and development of the malady altogether, or at all events so far to modify its future course, as to deprive it of much of its malignancy. Bryonia and Rhus are, in fact, the medicines whose ascertained operation is most closely akin to that of this class of disorders.

**BRYONIA.** This remedy is especially applicable to cases which manifest an inflammatory tendency. It should be selected in the incipient stage, when the following symptoms are present:—After a slight cold the patient complains of aching pains over the whole body, which admit of no relief from a change of posture; severe, throbbing, bursting, frontal headache (aggravated by opening or turning the eyes) prevails; the scalp is tender to the touch, and the head burning hot, yet the forehead is, nevertheless, frequently bathed with cold sweat; the sitting or even the recumbent posture is rendered compulsory by the prevalence of debility, languor, and heaviness of the limbs, and there is an aversion to cold air; the nights are disturbed, more especially the *fore-part of the night*, by ebullition or congestion of blood, heat, and anxiety; the patient sighs and groans during sleep, and is often aroused by agonizing or frightful dreams, which continue to haunt him even whilst *awake*. The digestive functions are considerably deranged, as exemplified by the presence of bitter taste, loathing of food, nausea and inclination to vomit, a yellow, furred and dry tongue, pressure or weight and pricking in the pit of the stomach, with sensation of distention about the lower ribs on both sides, and costiveness.

*Dose:* If singly, dissolve six globules in two tablespoonsful of water, and give a teaspoonful of the solution every two hours; if in alter-



nation with *Rhus*., dissolve six globules of each remedy separately in two tablespoonsful of water, and give a teaspoonful of the one solution four hours after the other, in rotation, until amelioration or change.

*RHUS-TOXICODENDRON* is especially applicable to the low, nervous variety in the premonitory stage of typhus. It should be employed when, either after exposure to a thorough wetting, or without any assignable reason, the patient is seized with violent *relaxation* of the *bowels*, accompanied by *colic*, and complains of chilliness even when seated *close to the fire*; further, when aching pains (or pains as if arising from the effects of contusions) are experienced in particular parts of the body, or when a painful sensation is experienced, as if the flesh had been torn from the bones; the tongue is *furred white*, and giddiness, inclination to vomit, or actual vomiting of *phlegm*, is present; the patient is tormented by numbness, creeping and tingling in the parts of the body on which he lies, together with lancinations, drawing pains, and stiffness in the nape of the neck and in the back, rigidity and feeling of paralysis in the *extremities*, with trembling on holding out the arms; the chief qualifying condition is that all the symptoms are, generally speaking, *exacerbated* during rest and at night.

*Dose*: If singly: Of a solution of six globules to two tablespoonsful of water, give a teaspoonful every two hours, until amelioration or change. If in alternation with *Bryonia*, dissolve six globules of each remedy separately in two tablespoonsful of water, and give a teaspoonful of the one solution four hours after the other, in rotation, until amelioration or change.

*IPECACUANHA* may be selected in the early stage of typhus, when it is ushered in by prominent symptoms of derangement in the digestive organs, such as headache, giddiness, nausea, vomiting, watery, yellow or *greenish*, slimy evacuations; particularly when these are associated with *slight chills alternately with heat*, or considerable *shivering* with slight heat or marked heat with but little shivering.

*Dose*: Four globules in a teaspoonful of water every three hours until amelioration or change.

*PULSATILLA* may also be selected in this stage of the disorder, when frequent shivering, bitter taste, whitish tongue, loss of appetite, nausea, vomiting of phlegm, slimy evacuations, and febrile heat intermingled with chills prevail; and more particularly when these symptoms become exacerbated towards evening, and occur in mild, temperate, or phlegmatic subjects, or in females, with extreme depression of spirits and tearfulness.

*Dose*: Four globules in a teaspoonful of water in every three hours, until amelioration or change.

*DIGITALIS* is indicated when nervous fever, or rather typhus, accompanied by bilious derangement, is ushered in by yellow, jaundiced hue of the skin; violent, bilious, spasmodic pains in the stomach; sensibility of the upper part of the stomach on the left side, on pressure; frequent urging to make water, particularly at night, with scanty urine; burning heat of the head and face; anxiety of mind and dread of some imaginary

impending misfortune; urination painful and difficult, or entirely suppressed.

*Dose:* Six globules in a tablespoonful of water every three hours, until amelioration or change.

**NUX-VOMICA.**—Symptoms of stomachal derangement, constipation, with frequent inclination and ineffectual efforts to evacuate. Nux-vomica is further indicated when the spasms, which not unfrequently accompany this disease, are confined to the stomach and intestines, particularly the inferior bowel—a frequent cause of the above-mentioned constipation; painful and difficult emission of urine; painful pressure and tension in the regions about the stomach and the lower ribs; sensation as if the limbs were bruised; general nervous excitability, with great nocturnal restlessness and slight delirium; weakness and aggravation of the symptoms in the morning. Temperament, sanguine or bilious; disposition, irritable and impatient.

*Dose:* Six globules in a tablespoonful of water every four hours, until amelioration or change.

**CHINA.**—This remedy is frequently of service in the first stage, or when paleness of the face, lancinating, rending, aching, or pressive headache, cloudiness of vision, buzzing or roaring in the ears, dullness of hearing are present; yellow or white coating on the tongue, dryness of the mouth, insipid, clammy, or bitter taste; inclination to vomit; sensibility and distention of the belly; thin, yellow, watery motions, occasionally intermixed with undigested substances; urine scanty, pale or dark colored and cloudy; oppression at the chest; dragging, shooting pains in the limbs; anxiety, sleeplessness, and general coldness and shivering.

*Dose:* Six globules in a tablespoonful of water every six hours, until amelioration or change.

**ACONITUM. BELLADONNA.** These are the best remedies in the *incipient stage* of the disorder, when *inflammatory symptoms* declare themselves from the commencement. The selection between Aconite and Belladonna will be gathered from the subjoined symptomatic indications, and from the article on the "*characteristic symptoms*," under the head of these remedies respectively. It should be added here, that when the disease becomes further developed, and still retains the inflammatory character—Bryonia and Rhus respectively, according to the symptoms, are generally preferable.

**ACONITUM** is indicated in the incipient stage by the presence of the following symptoms:—Chill followed by the burning heat, strong, hard, and quick pulse; dry skin, mouth, lips and tongue; the latter being generally of a bright red, but sometimes also slightly coated with white; excessive thirst; red and scanty urine; hurried breathing; the symptoms being aggravated or modified, according to the greater or less irregularity of the pulse. The condition which distinctly points to Aconite, as the remedy (when other complications are not present), consists in the aggravation of the above symptoms at night, often attended with slight delirium. Should the delirium become violent, and considerable cerebral disturbance be otherwise manifested, or should this particular symptom not yield rapidly to the action of Aconite;—when, moreover, the skin

continues hot and dry, and the bowels relaxed, or the motions are even passed involuntarily, or when there is inflammation of the glands of the throat (tonsils), or red, parched tongue, great thirst with disinclination or dread to satisfy it, it will be preferable to administer Belladonna until the indicative symptoms yield.

*Dose:* Of a solution of six pills to two tablepoonsful of water, give a teaspoonful every three hours, until amelioration or change. In mild cases in which the symptoms yield readily to the action of the medicine, the repetition may be deferred to intervals extending to twelve hours.

BELLADONNA is particularly indicated by the following symptoms, in addition to those above enumerated: alternate heat and chills, or general heat externally and internally, with redness, burning heat, and bloated appearance of the face, or alternations of coldness and paleness, and heat and redness of the face, violent throbbing of the large arteries of the neck; redness, sparkling, and protrusion of the eyes, with dilation of the pupils, extreme sensibility to light, and distortion of the eyes; singing or noise in the ears to a greater or less degree; wild expression of the countenance, with uneasy glancing around, as if from fear, sometimes attended with a marked inclination to run away; violent shooting pains in the forehead; or dull heavy pain, causing the patient to put his hand frequently to his head; sopor; furious delirium or loss of consciousness; delirium and snatching at the bedclothes, or spasmodic or convulsive attacks; parched lips, soreness of the corners of the mouth, redness and dryness of the tongue, which is also sometimes foul, and covered with a yellow coating; skin hot and dry; bitter taste in the mouth, intense thirst, difficulty of deglutition, especially of liquids; nausea; pressure at the pit of the stomach; excessive distention of the bowels, and constipation, or watery motions; scanty and red or amber-colored urine; rapid respiration; pulse full and accelerated, or quick, hard and wiry; inflammation and swelling of the glands before and beneath the ears.

*Dose:* Dissolve six globules in three tablepoonsful of water, and give a teaspoonful of the solution every four hours, until amelioration or change. In mild cases, or when the symptoms yield readily to the action of the medicine, the repetition may be deferred to a period of twelve hours, and repeated at such intervals, until amelioration or change.

STRAMONIUM is indicated by symptoms of the same nature as those which indicate Belladonna, with the addition of the following:—twitching of the muscles of the face, starting of the tendons, squinting, trembling of the extremities, tremulous motion of the tongue on protrusion, burning heat of the body, suppression of the urine, fantastic gesticulations, and involuntary spasmodic smiling.

*Dose:* Four globules in a teaspoonful of water every three hours, until amelioration or change.

HYOSCYAMUS is indicated by the same symptoms as have been stated at length under the head of Belladonna, with the addition of the following:—twitching of the tendons, strong, full pulse, fullness of the veins, burning heat of the skin, sensation of pricking all over the body, and constant delirium; frequent but ineffectual urging to urinate.

*Dose:* Three globules in a teaspoonful of water every three hours, until the symptoms are distinctly modified or changed.

BAPTISIA (Wild Indigo) is especially required when the weak and tremulous feeling; the quick (90), full, and soft pulse; the internal and external heat, with thirst; the headache and tendency to delirium; the tongue yellowish-brown in the center, and red at the edges; the constipation alternating with diarrhœa; all contribute to make up the morbid picture;—hot, dry skin and a quick, full pulse; the tongue is thickly coated with a *whitney-brown* fur; the head aches, and there is at least nocturnal delirium; no appetite and great thirst; the urine is high colored, and generally with constipation.

*Dose:* The same as directed for stramonium.

#### TREATMENT OF ABDOMINAL TYPHUS;

*That is, Typhus with tenderness and distention of the belly, griping, or some times dull, continuous pain, diarrhœa, etc.*

MERCURIUS will be found a most efficient medicine, if immediately employed when the disorder assumes the low form of abdominal typhus, or occurs in persons of sluggish constitution and slow circulation, and is attended with pale, yellowish appearance of the face, severe headache, or sensation as if a tight band were across the forehead; thickly-coated tongue; bitter or foul taste; little thirst; sensitiveness of the region about the navel and the pit of the stomach, to the touch, and distention of the belly; evacuations, copious, watery, flocculent, or slimy and even bloody, sometimes qualified by straining without evacuation; at first, dry burning skin followed by profuse, debilitating sweats; depressed pulse, and great prostration; extreme restlessness and anxiety, with constant tossing about in bed; and disturbed and unrefreshing sleep with anxious dreams.

*Dose:* Six globules in a teaspoonful of water, every two hours, until the evacuations become diminished in number and improved in appearance, and the tenderness and pain in the lower part of the stomach, etc., are relieved. After which some other remedy must be selected, in accordance with the remaining symptoms; consider Acidum Nitricum, amongst others.

RHUS-TOXICODENDRON is especially indicated in abdominal typhus characterized by continued heat and dryness of the skin; violent delirium; oppression at the heart, with sighing and moaning; pains in the limbs; extreme debility; tongue and lips dry and red, or covered with a brown or blackish, tenaceous fur; red, burning, cheeks; convulsive twitching of the tendons, snatching at the bedclothes, drowsiness or stupor, with muttering and loud, nasal breathing; weak, accelerated pulse; anxious expression of countenance; sleep disturbed, or prevented by the frequent recurrence of sudden starts; eyes inflamed, watery and insensible; features collapsed; breath exceedingly offensive; involuntary evacuation of the excrement and urine; coldness of the extremities; sinking energies; livid spots and miliary eruption.

*Dose:* Dissolve twelve globules in three tablespoonsful of water, and give a teaspoonful of the solution every two hours until three doses have been given; then extend the intervals (or sooner, if *distinct* improvement takes place) to four hours, and continue the administration until the symptoms particularly indicative subside or be-



come altered. If no alteration follow the fourth dose, or the aspect of the symptoms be as follows, proceed with the next remedy.

CAMPHOR frequently proves useful after Rhus, particularly when the following symptoms prevail: heat of the head, with confusion of ideas, or violent delirium; giddiness; throbbing headache; burning heat in the forehead; cold and clammy skin; continuous coldness of the hands and feet; debilitating and clammy sweat; tendency to violent relaxation of the bowels; scanty cloudy urine, which deposits a thick sediment; great weakness, and feeble, scarcely perceptible pulse.

*Dose:* One drop of the saturated tincture on a small lump of loaf sugar, every quarter of an hour, until distinct amelioration or change:—or if the more urgent symptoms have yielded, and the following remain, proceed with the next remedy.

COCULUS may often follow either Rhus or Camphor (after the previous employment of Rhus), especially when the great debility continues, and the patient complains of giddiness and headache; or when there is a tendency to swooning or paralysis of the limbs, and when there are prominent symptoms of derangement of the digestive functions.

*Dose:* Of a solution of six globules to three tablespoonsful of water, give a teaspoonful every two hours, until amelioration or change.

These remedies, either singly or in alternation, are amongst the most important, in cases of a desperate character, and when the most alarming symptoms occur.

ARSENICUM. This is decidedly one of the most important remedies in abdominal typhus, especially in the second and third stages, sometimes restoring the patient when almost beyond the reach of hope, and renovating the vital spark. The chief indications for its employment are:—*extreme prostration of strength*,—falling of the lower jaw,—open mouth,—dull and glassy eyes,—bitter taste, inclination to vomit,—pressure and aching at the pit of the stomach, pain in the right side of the inferior region of the belly,—bursting headache,—giddiness,—violent or low delirium,—drowsiness,—flatulent distention of the bowels,—burning thirst,—dry, hot skin,—parched, cracked, sometimes blackish-looking clammy tongue,—and violent and continuous relaxation of the bowels; pulse, scarcely perceptible, and intermittent.

*Dose:* If singly, of a solution of six globules to three tablespoonsful of water, give a teaspoonful every quarter of an hour (in very critical cases), or every hour (in less urgent instances) until amelioration or change, doubling the length of the intervals as soon as distinct improvement occurs. If in alternation with Veratrum, dissolve separately six globules of each remedy in three tablespoonsful of water, and give one teaspoonful of the one, half an hour after a similar dose of the other (in very critical cases), in rotation—or at intervals of one hour (in less urgent instances), until amelioration or change.

VERATRUM is occasionally useful after or in alternation with Arsenicum, when the inferior extremities become cold and covered with cold sweat.

*Dose:* In every respect, singly or in alternation with Arsenicum, as directed for the latter remedy.

CAREO-VEGETABILIS may also prove serviceable in very critical cases

It is indicated where we find drowsiness with rattling respiration,—face pinched, sunken, and death-like,—pupils insensible to light, pulse scarcely perceptible, and the vital power rapidly sinking,—cold perspirations on the face and extremities,—involuntary and offensive evacuations,—deep-red urine, with a cloud floating in it, or rising towards the surface. In abdominal typhus, however, the more particular indication consists in symptoms of incipient ulceration, or in signs of so-called putrescency.

The following symptoms are also distinctly indicative of this remedy:—burning, lancinating pains about the region of the stomach, and deep in the bowels, which become renewed after partaking of food of any kind, and are accompanied by great anxiety, excessive flatulency, and the evacuation of burning, light-colored, fetid, watery, bloody stools, attended with painful urging; desire for salt food, and for coffee, with aversion to meat, generally, and dread of indulging the craving, lest the sufferings be aggravated.

*Dose:* In every respect, singly or in alternation with Arsenicum, as directed for that remedy, above.

#### TREATMENT OF THE SECOND OR ACTIVE STAGE IN TYPHUS,

*Whether of the inflammatory or low variety.*

BRYONIA is more particularly indicated when the disorder assumes the character of inflammatory nervous fever, or typhus especially affecting the brain, with violent, stupefying headache, as from a blow, and pain across the forehead and at the temples, as if the head would burst; frequently raising of the hands to the head. Aggravation of these sensations by movement—continued, violent delirium with excessive febrile heats; foul, thickly-coated, yellow tongue, or dry, cracked tongue, with pinched mouth and great thirst, and vesicles in the mouth or on the tongue; furred lips; nausea, inclination to vomit, or vomiting of mucous and bilious matter; tenderness of the pit of the stomach, when touched; general heat of the whole body, dryness of the skin, redness of the face, and profuse perspiration during the fever; sensibility about the region of the stomach; distention of the belly, oppression at the chest, and frequent sighing and moaning, indicative of threatening miliary eruption; constipation, or relaxed stools; urine of a deep orange color or bright yellow, with yellow sediment; sensation as of a plug in the throat, with difficulty of hearing; stitches in the side; drowsiness or disposition to sleep during the day; sleeplessness, fugitive heat, and excessive restlessness, or continued drowsiness or stupor, with startings and unpleasant dreams; painful shootings and soreness of the limbs, aggravated by movement; trembling of the hands; pulse *quick*, soft, *frequent*, or irregular, small and intermitting; miliary interruption, livid spots; irritability, irascibility, despair of recovery.

*Dose:* If singly. Under very favorable circumstances, of a solution of six globules to three tablepoonsful of water, give a teaspoonful every twelve hours. In cases which assume the more serious features, a similar dose should be repeated every three hours, until amelioration or change. If in alternation with Rhus. Dissolve separately, six globules of each remedy in three tablepoonsful of water, and give a teaspoonful of one solution four hours after the like dose of the other, in rotation, until amelioration or change.

**EUPATORIUM-PERFOLIATUM.**—Pain in the bones, attended with hot dry skin. This remedy has been highly recommended by the most successful practitioners as Drs. Williamson, Neidhard and others.

*Dose:* The same as is directed for Bryonia.

**RHUS-TOXICODENDRON.**—This medicine is more peculiarly suitable to the low form or stage, Bryonia being more applicable to the inflammatory, but will frequently be found serviceable in all the stages of the disease, particularly when there is undue relaxation of the bowels, congestion to the head, oppression at the chest, and great weakness. The headache is generally of a stupefying nature, with a feeling as if from a bruise, but not so severe as that indicating Bryonia; the tongue presents nearly the same character, *less* nausea and inclination to vomit exist; violent pain is present about the region of the stomach, especially when touched. Constipation as named of Bryonia, but more frequently *copious, yellowish or loose*, bloody evacuations, with severe cutting pains in the belly; the symptoms are general heat, and those of the face resemble those mentioned under Bryonia, but without the perspiration, or at most, a clammy feeling of the skin. The urine is hot, dark colored, or at first clear, and afterwards turbid; the symptoms of the ears the same; sleep also the same; difficult deglutition of *solids*, as if from *contraction* of the throat and the gullet; general trembling, debility, and prostration, almost amounting to paralytic weakness of the different limbs; shooting pains in various parts of the body, aggravated when at *rest* or at night, and momentarily *relieved* by *moving* the part affected; pulse quick and small or weak and slow; as mental or moral symptoms, we may notice, excessive anguish, anxiety, extreme lowness of spirits, and disposition to weep.

*Dose:* Whether singly or in alternation with Bryonia, in all respects as directed for the latter remedy above.

**ARNICA** is also of some importance in *low* or sluggish *nervous* fever, with lethargy, or delirium, and snatching at the bedclothes; or when the patient lies in a state of unconsciousness, as if he had been stunned by a concussion of the brain.

*Dose:* Three globules in a teaspoonful of water every four hours, until amelioration or change.

**PULSATILLA** is often of considerable service in the *second stage* of typhus, when slight delirium, tears and lamentations, alternating with drowsiness, prevail.

*Dose:* Three globules in a teaspoonful of water, repeated, if necessary at the expiration of four hours, and so on until amelioration or change. But if any of the undermentioned symptoms declare themselves, proceed with the next remedy.

**ACIDUM-PHOSPHORICUM** is frequently required, either when, at the commencement of the disease we find great exhaustion and prostration, with wandering even when awake; or in almost hopeless cases (alone or still better in alternation with Rhus) when the patient is always found lying on the back in a drowsy state, and either makes no reply when spoken to, or answers *incoherently*; or in other instances, and especially after the *previous* employment of Pulsatilla, when the following symptoms

prevail:—constant, loquacious delirium or low muttering; snatching at the bedclothes; fixed looks; seeming efforts to escape from some alarming object; black incrustations on the lips; dry, hot, skin; continual, copious, watery discharges from the bowels, the motions, being in general involuntary; bloody evacuations; frequent, weak, and occasionally an intermitting pulse.

*Dose:* Three globules in a teaspoonful of water, at first every hour, extending the intervals to three hours as soon as the symptoms are modified, and continuing the administration until positive amelioration or change. Or if the under-mentioned symptoms should in particular continue unmodified, proceed with the next remedy after a lapse of three hours from the last dose.

ACIDUM-NITRICUM should be administered after or during the course of Acidum-phosphoricum—but not within less than three hours of a previous dose of the latter—if the bloody evacuations fail to yield readily to the previous treatment. Acidum-nitricum is, moreover, particularly useful when there are *white specks* in the mouth and throat; sensibility of the belly on pressure; relaxation of the bowels, and slimy, acrid, greenish-colored stools; straining; intestinal ulcerations; shooting pains in the lower bowel; scalding when passing water; and tendency to collapse. In some cases it is necessary to administer this remedy by injection or enema, as below stated.

*Dose:* Three globules in a teaspoonful of water, repeated, if necessary after four hours (or every four hours till the symptoms yield), returning to Acidum-phosphoricum, if requisite, or proceeding with the next remedy, after a pause of three hours, if the under-mentioned symptoms, in particular, supervene. The ENEMA should consist of six drops of the tincture at the third dilution to every two table-spoonsful of water.

CANTHARIDES should be administered after or during the course of either of the three foregoing remedies, but not within less than three hours of a dose of any other medicine, if *painful evacuation of water be distinctly manifested*.

*Dose:* Three globules in a teaspoonful of water, repeated, if necessary after an interval of three hours (or continuing at such intervals until the *indicative symptom is positively subdued*), returning to either of the foregoing, or proceeding with other treatment, or suspending treatment, according to the prevalence of particular symptoms or general improvement be manifested.

CHINA is sometimes of considerable value in the *second stage* of this disease, especially when the attack has become protracted and tedious:—*nocturnal sweats, obstinate relaxation* of the bowels, but *unattended* with pain in the bowels, the *tongue* at the same time being *clean*.

*Dose:* Three globules in a teaspoonful of water, every four hours, until amelioration or change, unless, after the third dose, the sweats remain unmodified, when proceed with the next remedy, after a pause of four hours.

SULPHUR should follow the third dose of *China* in the event of the continuance of the sweating, notwithstanding the previous administration of the latter remedy. *Sulphur* has always been found of considerable service—*Bryonia, Rhus, or Acidum phosphoricum* having been fruitlessly administered, but particularly when the following symptoms were encoun-



tered: pale and collapsed countenance, burning, itching eruptions on the lips, dryness of the mouth: foul, dry tongue; bitter taste; slimy or bilious vomiting; tenderness of the region about the stomach, and pain as from excoriation of the parts above the navel, increased on pressure; flatulent rumbling in the bowels; frequent, watery, flocculent, or yellow evacuations; cloudy urine, depositing a reddish sediment; miliary eruption; eruption with a discharge of matter; bleeding at the nose; stitches in the chest, oppressed breathing; dry cough, worse towards evening and at night; sleeplessness, or whining during sleep; dry heat during the day, with moderately quick pulse, and profuse sweating at night,

*Dose:* Dissolve six globules in three table-spoonful of water, and give a teaspoonful of the solution every six hours, unless, after the second dose, the following symptoms be present, when proceed with the next remedy.

ACIDUM-SULPHURICUM should follow the second dose of *Sulphur* after an interval of six hours, if the *sweating be yet very profuse*, particularly if so when *lying still* and modified by movement; or it should even precede either or both of the preceding remedies, if the sweating be *very profuse when lying still and diminished by movement*.

*Dose:* Three globules in a teaspoonful of water, every four hours, until amelioration or change

<p>CALCAREA, HEPAR-SULPHURIS, LYCOPodium.</p>	}	<p>CALCAREA-C. may sometime be administered advantageously, alternately with <i>Belladonna</i>, <i>Arse-nicum</i> or <i>Rhus</i>, according to the symptoms; it is further, occasionally, a most efficient remedy in cases in which debilitating relaxation of the bowels, or bleeding of the nose, will not yield to such remedies as <i>Acidum-phosph.</i>, <i>Rhus</i>, <i>China</i>, etc.; lastly, <i>Calcarea-c.</i> may be exhibited with advantage where there are symptoms of impending miliary eruption, jerking or twitchings in the limbs, particularly in children, tendency to inflammation of the membranes of the brain, delirium, etc.</p>
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*Dose:* Of a solution of six globules to three table-spoonful of water, give a teaspoonful every three hours until amelioration or change. Or if the undermentioned symptom should declare itself, or having been previously present, should continue unmodified after the *third* dose of *Calcarea*, proceed with the next remedy, after a pause of four hours.

HEPAR-SULPHURIS should follow the third dose of *Calcarea* after an interval of four hours, if *discharge of blood from the nose* should supervene, or, having been previously present, should continue without material improvement; except, indeed, the presence of other symptoms of a more urgent character, should require the administration of other remedies, such as *Pulsatilla*, *Belladonna*, *Rhus* or *Sulphur*.

*Dose:* Three globules in a teaspoonful of water, repeated, if necessary, after an interval of four hours—or continued, at such intervals, if requisite, until the distinct modification of the indicative symptom.

LYCOPodium is often a valuable remedy after *Calcarea*, (with or without the intermediate administration of *Hepar-s.* according to the circumstances.) in the second stage of typhus, when miliary eruption is slowly and scantily developed, and the following symptoms occur: drowsiness with muttering delirium; confounding of words; stammering; twitching

of the tendons, snatching at the bedclothes, flatulent distention of the bowels, with constipation; affections of the bladder; or when there are shiverings alternating with heat; circumscribed redness of the cheeks; debilitating sweats; excessive debility; complete hanging of the lower jaw; half-closed eyes; slow respiration; or, state of excitement, without heat or congestion in the head or face; redness of the tongue; constipation; burning urine; tranquil and resigned state of mind, or surlieness and malevolence, especially on waking.

*Dose:* Three globules, in a teaspoonful of water, every three hours, until amelioration or change. In case of amelioration, pause until the symptoms evidently retrograde, when resume, at intervals of six hours, as long as necessary. In the case of change suspend treatment for four hours, and continue with the remedy newly indicated.

LACHESIS may prove serviceable in fever analogous to typhus, attended with *giddiness on rising or sitting up; muttering; bitter taste; delirium; hanging of the lower jaw; vacant expression of countenance; sunken features; yellowish tongue, with bright-red margins; cracked tongue; smooth, dry tongue, with difficulty of protruding it, and inarticulate speech; seeming paralysis of the eyelids; lethargic sleep, and tendency to lie in the prone position; thirst, with disinclination to drink; brownish-red, copious urine.*

*Dose:* Three globules, in a teaspoonful of water, as directed for Lycoperdium—or if the symptoms be very urgent, begin by administering at intervals of two hours—extending the intervals to four hours after two doses have been given.

PHOSPHORUS is of great service where we find great dryness of the tongue, heat of the skin, small, hard, quick pulse, painless relaxation of the bowels, with excessive flatulent rumblings; or when the disease becomes, as it were, concentrated in the lungs, and there is consequently congestion, with extremely laborious breathing and excessive anxiety, dullness on percussion, mucous rattling, stitches during respiration, cough, with copious expectoration of phlegm mixed with blood or even offensive matter, more benefit may be looked for from this than from any other remedy. *Phosphorus* is also serviceable when, notwithstanding the pneumonic concentration, there is, moreover, sensibility and rumbling on the right side of the lower part of the belly, or when there is continued heat of skin, with small, hard, accelerated pulse, throbbing of the great arteries of the neck, and nocturnal sweats; sleep disturbed by crowding of ideas, weeping, whimpering sudden cries, and restlessness. The patient awakes from sleep complaining of great thirst and dryness of the mouth, excessive heat, and aching of the whole body. In addition to these symptoms, there is a burning sensation in the belly and fundament, with frequent semi-fluid stools, streaked with blood; giddiness, confusion, and throbbing pains in the head; deafness: frequent discharge of blood on blowing the nose, and heat in the face; tongue and lips dry and cracked; bitter taste; copious evacuations of urine, which deposits a whitish or reddish sediment; delirium; obstupescence.

*Dose:* Dissolve six globules in three table-spoonful of water, and give a teaspoonful of the solution every four hours, until amelioration or change.

ACIDUM-MURIATICUM. Weakness, with a constant tendency to sink

*down in the bed*, with groaning during sleep, almost paralytic state of the tongue, rendering it nearly impossible for the patient to speak, even when in a collected state, and great dryness of the mouth.

*Dose:* Of a solution of six globules to three tablespoonsful of water, give a teaspoonful every three hours, until amelioration or change.

**NATRUM-MURIATICUM** is recommended in nervous fevers with great debility, insatiable thirst, dryness of the tongue, and loss of consciousness, and particularly when they follow in the course of antecedent debilitating diseases.

*Dose:* Of a solution of six globules to three tablespoonsful of water, give a teaspoonful every three hours, until amelioration or change.

**HELLEBORUS** has also been found of great utility in nervous fever, occurring after other febrile affections, such as scarlatina, measles, stomachal fever, worm fever, and cholera, with pain as from contusion, combined with tumefaction, in the integuments, of the head; disposition to somnolency, with confusion of ideas, and extreme restlessness; dark, cloudy urine; heaviness, or feeling of stiffness and powerlessness in the limbs; depression of spirits, and obtuseness of the faculties.

*Dose:* A solution of six globules, as directed for *Natrum-muriaticum*.

**SECALE-CORNUTUM** is, in like manner, with *Natrum-m.* and *Helleborus*, recommended by many homœopathists who have had frequent opportunities of treating nervous fevers, particularly in cases, occurring in the wake of other diseases; but is more especially appropriate where the symptoms developed clearly proceed from irritation of spinal nerves, with wandering, fugitive, spasmodic pains, extending from the base and column of the spine into different parts of the body; the spasms which affect the face become subsequently of an intermittent nature; whilst those that have their seat in the hands and feet partake of a continued character. This remedy is further indicated by dry heat of the skin, insatiable thirst, accelerated pulse, great restlessness and sleeplessness; excessive languor, and aversion to food. Should the spasmodic affections readily yield to the employment of this remedy, but if the febrile symptoms continue, some other remedy appropriate thereto must be prescribed.

*Dose:* Dissolve six globules in three tablespoonsful of water, and give a teaspoonful of the solution every three hours, until amelioration or change.

**ARSENICUM,** } These remedies are of signal importance, either  
**VERATRUM,** } *singly, in succession, or in alternation,* according to the  
**CARBO-VEG.** } *individuality, succession, or combination* of the symptoms present, in the *second stage* of typhus, in all desperate cases in which vitality becomes nearly extinct. For distinctive indications the reader is referred to the foregoing prescription of these remedies, under the head of **ABDOMINAL TYPHUS.**

*Dose:* If *singly*, of either remedy:—Dissolve six globules in three tablespoonsful of water, and give one teaspoonful of the solution every quarter of an hour (in very critical cases), or every hour (in less urgent instances), until amelioration or change, doubling the length of the intervals as soon as distinct improvement ensues. If *in alternation*. Dissolve, separately, six globules of the remedies to be used alternately in three tablespoonsful of water, and give a tea-

spoonful of one, half an hour after a similar dose of the other (in *very critical cases*), in rotation, or at intervals of an hour (in *less urgent instances*), until positive amelioration or change doubling the length of the intervals as soon as a degree of improvement is evident.

**CARBO-VEG.** In addition to the indications given for this remedy, under the head of ABDOMINAL TYPHUS, the following symptoms are characteristic of its employment in the *second* stage: excessive anxiety, and burning heat of the skin, arising from congestions to the head and chest; the eyelids agglutinated during the night; *deafness and ringing in the ears*; *bleeding* from the nose, and obstruction of the nose from incrustations, eruption around the nose, and brown or blackish, cracked lips; the legs drawn up during sleep, and the sleep restless, and disturbed by frequent waking.

*Dose:* Three globules in a teaspoonful of water, every three hours, until amelioration or change, when thus specially indicated;—when, *as above, singly or in alternation*, the dose should be as directed under the last head.

#### TREATMENT OF TYPHUS CHARACTERIZED BY STUPOR.

In treating of this variety of the malady it will be unnecessary to recapitulate the remedies already enumerated, in relation to the various stages and varieties hereinbefore described. Suffice it to say, that the same *features and conditions* would indicate their employment in this variety, and that the method of administration should be in every respect similar. But the symptoms which more particularly distinguish this species of typhus, especially indicate, by assimilating most closely to the specific operation of

**OPIMUM.** This remedy should accordingly be given when the following group of symptoms prevails:—great drowsiness or lethargy, with stertorous breathing, open mouth, half-closed eyes or fixed look; slight delirium or muttering, snatching, at the bedclothes; the patient being in a continual state of stupor, from which it is extremely difficult to rouse him, and from which he is scarcely aroused before he relapses into his former state; furious delirium, and incessant restlessness; dry, offensive stools, with involuntary evacuations of excrement and urine.

*Dose:* Of a solution of six globules to three teaspoonsful of water, give a teaspoonful every three hours, until amelioration or change.

#### TREATMENT OF THE STAGES OF DEBILITY AND CONVALESCENCE AFTER TYPHUS.

**RHUS-TOXICODENDRON.** This remedy retains its importance in the treatment of typhus throughout all the stages of the malady, and is amongst the best appliances during the period of debility which generally supervenes after the issue of this fever. Rhus is more especially indicated in this stage, when the progress towards recovery is sluggish, the pulse retaining a febrile character, the appetite, although improved, being capricious, the bowels predisposed to relaxation, and the chest not yet exempt from feelings of oppression.

*Dose:* Three globules, in a teaspoonful of water, night and morning, until distinct amelioration or change. Upon evident improvement taking place under this treatment, it will be sufficient to repeat the dose every night.



CHINA is frequently of great use, in this stage, against the debility resulting from the effects of the malady, more especially when the patient has suffered much from violent relaxation of the bowels during the previous course of the disease; or if there be a tendency to continuance in this symptom. China is also particularly useful when debilitating sweats supervene. In this case it should be followed by Sulphur, if that symptom has not yielded distinctly, after the second dose.

*Dose:* In the case first described, three globules, in a teaspoonful of water, repeated, at intervals of twelve hours, until three doses have been taken. Under the last-stated circumstances, a similar dose night and morning,—and if the symptom does not distinctly yield within twelve hours after the second dose, proceed with the next remedy.

SULPHUR should follow, twelve hours after the second dose of China, in case of the obstinate continuance of the sweats, or of the presence of dry cough at night.

*Dose:* Three globules, in a teaspoonful of water, every twelve hours, until amelioration or change.

FERRUM-METALLICUM is a preferable remedy when the pulse continues weak or frequent, after a profuse discharge of blood, particularly in the case of females affected with green-sickness, or who have previously suffered from it.

*Dose:* Three globules, in a teaspoonful of water, morning and evening, for a week.

#### ACCESSORY MEASURES DURING THE PERIOD OF DEBILITY.

The fever having subsided, and the patient being able to sit up, should first be removed to another apartment, free ventilation, and a moderate degree of warmth being simultaneously secured. By degrees, and as soon as possible, passive motion, and from thence, if possible, walking exercise (not sufficient to exhaust the patient), should be daily sought in the open air, in fine weather, with, however, particular precautions against damp or chill. Nothing will conduce to restore the patient to health and strength more rapidly and thoroughly than such accessory treatment with proper precautions in respect of diet, as stated below.

#### AFTER EFFECTS OF TYPHUS.

*Bed-sores, Abscesses, Boils, Swelling of the Feet, Weakness of Digestion, and General Derangements.*

These are more or less frequently the results of very severe or protracted cases,—especially when the reactionary process is sluggish,—and require simultaneous local and constitutional treatment, with this reservation: that when the local application is *unmedicated* (such as pure spirits), we may select the constitutional remedy, irrespective of such application, according to the particular features of the case, by consulting the symptoms present, and the article on “Boils” and “Abscesses,” as regards those particular affections.

#### EXTERNAL TREATMENT OF BED-SORES.

SPIRITS-OF-WINE, Collodion, or Glycerine, will in general, suffice to remove this troublesome affection.

*Application.* To one part of the Spirit, add two parts of pure water, and saturate with this solution a linen pad, which must be applied to the parts and kept moist.

ARNICA (tincture) should be employed, if the diluted Spirit has proved insufficient and inflammation has *not* supervened.

*Application.* To one part of the Tincture add twenty parts of water, and proceed as directed for Spirits of Wine.

TINCTURE OF CARBO-VEG.,	} When mortification supervenes we may successfully employ either
TINCTURE OF ARSENICUM,	
TINCTURE OF CINCHONA (concentrated).	

of these remedies (according to symptomatic indications), simultaneously with the internal administration of the same medicine as stated below.

*Application.* To a wine-glassful of water add five drops (of the Tincture of Arsenicum), or ten drops (of either of the others), and saturate with this solution a linen pad, which apply to the parts and keep moist.

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## YELLOW FEVER.

In this article we have quoted freely from the report of that commission of eminent physicians appointed 1878 by the oldest National Medical Association in America. This commission was composed of eleven of the most thoroughly educated physicians in the U. S., seven of whom were experts in this disease in all its phases.

### CAUSES AND PREVENTION.

Yellow Fever is a specific disease, entirely independent of malaria, occurring rarely a second time in the same person. It is infectious and capable of transmission to any distance by means of fomites or infected material.

The yellow fever germs, for we accept provisionally the germ theory of the disease, are indigenous to the West Indies and perhaps to the west coast of Africa, and have been thoroughly naturalized in many localities in the southern portion of the United States. They were imported into New Orleans during the last quarter of the eighteenth century, and have existed in the soil or atmosphere of that place ever since, either in a latent or an active condition. They may lie dormant for many years consecutively, and they require a concurrence of causes to develop them into a state of disease-producing activity.

Some of the factors which seem to be favorable to the excitation of the yellow fever germ are the following :

Low, swampy ground near the level of a tropical sea.

Long continuance of very high temperature, following heavy rains.

Long continuance of south and east winds.

Aggregations of human beings with the excreta of their bodies in a small space. A crowded and dirty ship may be a nidus for yellow fever, as well as a crowded and dirty city.

Long continuance of calm weather, unbroken by thunder-storms.

Exposure of decaying vegetable and animal matter to a burning sun.

Inefficient drainage and the general accumulation of filth, especially the city garbage.

Deficiency of ozone in the atmosphere.

Pestilential exhalations from an upturned soil.

When the yellow fever germ has been waked into activity by these causes, it may be transported to places where none of them exist. It seems that a certain concurrence of several of the above factors is necessary to the generation of yellow fever. There is probably one combination in one epidemic, and a somewhat different combination in the next epidemic. An epidemic may be mild or severe according to the number and force of the concurring causes. There may also be other unknown but discoverable factors, which may be necessary at one time to produce an epidemic, and not necessary another. No one of the above suggested causes could excite an epidemic by itself, and it is not probable that they all ever concurred equally to the formation of the disease. The most extensive collections and comparison of facts are necessary to illumine the very great darkness which lies upon these complex questions.

The naturalized yellow fever germs may receive so slight a stimulus as to produce only a few sporadic cases. Or they may be vitalized in certain localities to such a degree as to occasion quite an outbreak in those localities, not easily communicated to other quarters. Or thirdly, the disseminated germs may be vivified in all directions, and a general epidemic excited. Or lastly, the naturalized germs may lie entirely quiescent, until fresh and active germs are brought in from foreign ports, which then act as sparks to ignite the inflammable material already existing. We thus have four shades or degrees of yellow fever visitation: sporadic cases: local and limited outbursts: epidemics from naturalized germs, and epidemics from importation.

In sporadic cases and limited outbreaks the specific nature of the fever is not clearly brought to light, and it is sometimes difficult to diagnose it from the dominant malarial or bilious diseases. The imported epidemic, whether from Havana to New Orleans or from New Orleans to Memphis, etc., etc., is always a more quickspreading and malignant disease than that arising from our naturalized germs. The comparative mildness of the late epidemic in New Orleans, is one out of several reasons for believing that the disease was of local origin.

The yellow fever of domestic origin can only be prevented by local sanitary measures. So long as the public authorities ignore the crying evils at home, and watch only for the enemy at the seaside, we shall continue to be scourged with repeated epidemics of yellow fever. Quarantine may or may not keep out the tropical foe, but our utmost energies should be concentrated against the enemy which has been domiciliated in our households for nearly a century.

Is there any personal prophylactic against yellow fever? None which has the least scientific value. Quinine is probably serviceable when malarial fevers are simultaneously prevailing, not because it has any

power against yellow fever, but because an attack of malarial fever, preventable by Quinine, might, if allowed to occur, precipitate an attack of yellow fever.

Quinine for intermittents, Belladonna for scarlet fever, and vaccination for small pox, are the only prophylactics which have commanded even the partial belief of the profession. They are all confessedly homœopathic in their actions, and we confidently believe, if prophylactics for yellow fever or any other disease exist, that they will be found only by study and experiment in that direction.

"To prevent the development of yellow fever, we recommend :

1st. The thorough drainage of the city. This mighty work can only be efficiently achieved by the general government. Whether that would be constitutional or not we need not pause to inquire. An intelligent people will some time or other so modify their government, that it shall recognize the superior claims of the health and lives of its population over those of railroad companies and harbor improvements. As is well known, the topography of New Orleans presents very considerable difficulties in the way of a perfect system of drainage, but not such as to be insuperable to engineering skill.

2d. The constant irrigation or flushing of the street gutters and canals, by fresh water pumped in daily by steam apparatus. Allied to this measure is a perfect system of water-works, which shall give an abundant supply of river water for drinking, bathing and cleansing purposes, so as to supercede the use of cistern water almost altogether. In this connection we may mention a curious fact communicated to the Commission by Mr. Harry Hammersly, who keeps a floating bathing establishment in the Mississippi river. One hundred and fifty boys under twelve years of age took one, and some of them two baths a day during the whole season, and not one of them had the yellow fever, although it prevailed extensively among their families, and children of that age were peculiarly liable to it.

3d. The consumption of all the city garbage by cremation. This new process has been extensively experimented upon during the last six months in the city of New York, and with extraordinary success. The plan has been described to us by Dr. George F. Foote, of Stamford, Connecticut, a brother of the inventor. A single large furnace has been so constructed as to consume 1,000 loads in twenty-four hours. The garbage is not handled, but dumped immediately from the carts into the furnace. The combustible material mingled with it—old rags, paper, straw, vegetable debris, unburnt coal in ashes, the sweepings of stores, factories, streets, etc., is about a sufficient supply of fuel for the whole work, when the fire is once started under a full blast. The gases from the combustion—carbonic oxide and carburetted hydrogen—are brought under the boiler and again burned to generate steam to drive the blowing engine. The expense for fuel is light ; there is no escaping odor, and the residue or slag, about eight per cent. by weight, can be made available for useful purposes.

One such furnace in each district of New Orleans would consume daily every atom of its garbage, deliver it from every pestilential emana-



tion and odor, and give its atmosphere something like the sweetness and purity of mountain air. Nor will it be many years, in our opinion, before the people of New Orleans, who are compelled by the nature of the soil to bury their dead above ground, will discover that in their case, at least, cremation is the very best disposition to make of the human body when the principle of life has abandoned its tissues.

4th. The generation of ozone to supply its deficiency in the atmosphere when detected by the proper instruments. This should be made one of the most special and important duties of the Sanitary Commission. Ozone is a peculiar gas, a modified form of oxygen, generated by electrical storms and violent concussions of the atmosphere. It is so powerful as a disinfectant that one part of it will purify three million parts of atmospheric air. Ozone is thus nature's great disinfectant and purifier, more subtle, powerful and ubiquitous than all others, and we must learn to utilize this splendid gift of the Creator for our own sanitary blessing. When it is deficient, deleterious gases accumulate and produce diseases of various kinds, and when the other factors of yellow fever productions are present, the deficiency of ozone may be the determining element for the manifestation of the disease. The scientists of the sanitary Commission will be provided with the instruments and chemical means for detecting its slightest variation, and for restoring it in suitable quantity to the air, where by the law of the equitable diffusion of gases, it will be almost instantly distributed many miles around.

There are many measures of great sanitary importance over which the Commission would exercise a strict supervision. It would enforce the frequent emptying and disinfection of water-closets, sewers and all places containing putrescent matters, vegetable or animal. It would see that no sacks of decaying coffee, or chaff in rice pits, or dead animals, or any offensive matter was left exposed so as to poison the atmosphere. It would prevent, so far as possible, the destruction of trees, and in every way encourage their planting and growth. Above all, it would forbid the upturning of the soil during the spring and summer months, as epidemics of yellow fever have followed such upturning at New Orleans, Natchez and Vicksburg, in such a manner as very strongly to suggest that the relation of cause and effect existed between this exposure of the earth and the development of the disease."

#### YELLOW FEVER—ITS SYMPTOMS.

This fever is a disease of warm climates, and has obtained the name of yellow fever from the hue which the skin of those affected by it very frequently acquires. The more constant symptoms of the disease are: violent vomiting, first of bilious and subsequently of brownish-black matter, which is also passed by stool; great anxiety and prostration, intense fever. Remarkable remissions take place in the course of the fever, succeeded in a few hours by exacerbations. The outbreak of the malady is generally preceded by sudden debility and restlessness, which are soon followed by headache, giddiness, faintness, and slight chilliness, to which are added præcordial oppression, want of appetite, and deranged digestion.

In other cases, the seizure is sudden and unattended with premonitory symptoms, and the course of the disease exceedingly rapid, and a fatal termination not unfrequent within thirty-six hours from the accession of the attack. The more usual form which the disease takes is, however, as follows: Immediately after the fit of chilliness and horror, violent reaction sets in, announced by a high degree of fever, with great heat of skin, strong throbbing of all the arteries of the body, and determination of blood to the head. The respiration is hurried and often laborious, attended with deep sighing and gasping for air. The face is flushed, the eyes heavy, sensitive to light and affected with burning pains, the tongue white, furred, and sometimes red, but soon becomes parched and dark-colored, and tinged with yellow after the vomitings come on; the thirst is excessive. A burning pain is sometimes experienced in the scrobiculus; an excessive sensibility to the touch in the right hypochondrium; and the stomach, irritable from the first, is rendered so much so as the disease advances, that everything which is taken into it is almost immediately rejected, along with a quantity of bilious matter. Severe darting pains traverse the head, the small of the back, and even extend down the thighs. The pulse is subject to variations, being in some cases quick and strong, in others quick, low and irregular; in plethoric individuals, who have not been long exposed to the relaxing effects of the warm climate, it is accelerated, full and bounding, for some hours after the development of the reaction; the urine is suppressed, or scanty and offensive; the stools likewise have a most disagreeable fetor; the patient is excessively restless, tormented with spasms in the abdomen and legs, and tosses about with anguish. These symptoms constitute the first or inflammatory stage of the fever, and may continue from twenty-four to sixty hours and upwards, according to the severity or mildness of the attack.

The second stage commences with the abatement of several of the preceding symptoms, and the increase or substitution of others. The skin and eyes present a yellow tinge; the head is confused, or delirium supervenes, and the eyes look glassy. The fits of vomiting are more violent, and the matter ejected becomes thicker and darker; the patient occasionally drops asleep, but instantly awakes in a fright, and sometimes he springs out of bed in a state of furious delirium, but instantly sinks to the ground in a state of tremor and exhaustion; the pulse flags, but is sometimes soft, at others high; the tongue is generally parched, harsh, and discolored, but sometimes moist and covered with a dark fur; there is frequent hiccup, and the skin is soft and clammy. The duration of this stage is also variable; rarely, if ever, longer than forty-eight hours, sometimes only twelve.

The first and second stages terminate by a remission of the more alarming symptoms, and a hope of recovery is entertained, but it is too often doomed to disappointment by insidious degeneration of the disease into the third stage, in which the pulse sinks, becomes irregular and intermittent, yet sometimes increases in frequency; the vomiting becomes incessant, and is attended with great straining and noise, from the violent belching of flatus; the matter vomited is grumous, resembling coffee-

grounds, and is named the black vomit. The breathing becomes more labored; the tongue black, or shrunk, dry and red; the eyes hollow and sunk, and the features shortened. A gradual aggravation of the symptoms then ensues, attended with startings or twitchings of the tendons, the limbs become deadly cold, and the hiccup distressingly constant. Hemorrhage, or oozing of blood takes place from different parts of the body; the urine is deep-colored, the stools black or sanguineous; the abdomen often tense and tympanitic; vibices make their appearance, and death slowly or suddenly terminates the scene.

#### ALLOPATHIC TREATMENT.

This disease is one in which the treatment must be directed to guiding the patient through it, as in typhoid fever. The fever is self-limited and will run its course.

The room should be managed as directed for typhoid fever. Disinfectants should be used as directed for that disease.

A very essential point in *all* cases, whether mild or not, is to keep the patient quiet in bed. This cannot be too strongly insisted on, from the first slightest indisposition.

During the first stage, the use of water should be resorted to, to moderate the intensity of the fever. Preference should be given to the wet sheet or cold sponging. They should be managed in the same way as directed for typhoid fever. If there is perspiration (sweating) bathing is not to be followed at all.

It is recommended by good authority to give three grains of Quinine, three grains of Dover's Powder, and three grains of Calomel, every two or three hours, while this stage of the fever lasts. (The writer would omit the Calomel). It is also recommended, if the skin continues hot and the fever high, to produce its reduction with Aconite. Sixteen drops of the Tincture in four ounces of water in doses of a teaspoonful every half hour, may be given until a reduction in the fever is produced. It may then be given every hour or two to maintain its effect. It certainly is appropriate if the treatment with water is not satisfactory.

Purgatives are generally given in the beginning of the disease, but they seem uncalled for, except for the relief of constipation, for which Castor Oil is to be preferred, in doses of a dessertspoonful to a tablespoonful (mixed well with an equal quantity of Glycerine and flavored with Oil of Cinnamon or Gaultheria), or recourse should be had to injections.

Regarding the use of Calomel or other mercurials, it is difficult to see what benefit can accrue from them, further than their action as cathartics, the use of which has just been discussed.

Emetics are not to be given, but all stomach trouble should be met by proper palliatives. The nausea and vomiting, by the use of Opium to the extent of relieving the pain, when, if the vomiting continue, the addition of drop-doses of Carbolic Acid, or Creosote in doses of one drop, or ten to twenty grains of Sub-Nitrate of Bismuth, or five-drop doses of Dilute Hydrocyanic Acid. Small lumps of ice may be swallowed. Mustard plasters, dry cups, or small blisters, two inches square, may be applied over the stomach. Poultices often relieve the nausea and pain.

Probably as appropriate a way to administer Opium as any, is by the hypodermic injection of a sixth of a grain doses of Morphine, or injection of a teaspoonful (dram) of Laudanum in an ounce of thin starch, into the bowel. The drug should be given at any time when necessary to relieve suffering. The ordinary dose may be given by the mouth, as one-fourth of a grain of Morphine.

Any coldness of the extremities should be met by the application of heat by the hot foot-bath made stimulating by adding Mustard or Cayenne pepper, and Mustard plasters. The bath should be given under the bedclothes. In this way the tendency to internal congestion, upon which may depend the tendency to hemorrhage, is relieved.

Cold to the head, by means of cold water, the ice cap, or bladders of pounded ice, may be used to relieve headache.

As soon as the amelioration of the symptoms (usually temporary) occur at the close of the second or third day, particular attention must be given to nourishing the patient, and keeping him quiet in bed—perfectly quiet.

Food and Alcoholic stimulants must be given as directed in the treatment of typhoid fever throughout the course of the disease. By this means alone life may be saved.

Beginning at the period of amelioration in the symptoms, tonic doses of Quinine from two to three grains four times a day.

The mineral acids are indicated the same as in typhoid fever, preference being for the Aromatic Sulphuric Acid, on account of the tendency to black (hemorrhagic) vomit. The dose is ten drops largely diluted with water. It can be given at intervals of two hours or more. The teeth should be wiped with a cloth dipped in a solution of Bicarbonate of Soda after giving the Acid to prevent injury to them from the Acid.

To prevent hemorrhage into the stomach, and consequent black vomit, ten or fifteen-drop doses of the tincture of the Chloride of Iron four to six times a day, largely diluted in sweetened water. If hemorrhage occur ten-grain doses of Gallic Acid should be given in the Acid mixture.

Difficulty in the secretion of urine should be met by diuretics, as the infusion of Digitalis in doses of a tablespoonful, or the Tincture in doses of half a teaspoonful with half a teaspoonful of the Vinegar of Squill, given four to eight times a day.

If diuretics are inoperative, and especially if there are symptoms of uremia, (poisoning by retention of urea, an ingredient of the urine, in the blood), the smell of Ammonia in the breath, or insensibility, the hot air bath should be used to produce copious sweating. If this does not relieve, a cathartic of one or two drops of Croton Oil or a quarter of a grain of Elaterium in Glycerine may be given.

When the symptoms of remittent or intermittent fever are associated with yellow fever the first remission or intermission should be seized upon for giving thirty grains of Quinine at a dose. Subsequent treatment of these complications should be as directed for these diseases.

Salycilic Acid has been used by Dr. Buenz of Savannah, in the epidemic of 1876, in a single dose of a dram and a half in capsules, or rubbed



up with sugar; if the stomach rejected it, twice the quantity (three drams) was given by the rectum (injections into the bowel.) Out of one hundred and seventy-nine patients only four died. The disease during that epidemic was of intermittent and remittent type. Whether this treatment is generally applicable is a question.

During the severe epidemic of 1878, in the Southern states, Dr. Marshall of Burlington, Iowa, who was then at Jackson, Miss., states while the disease was almost universally fatal, wonderful results were obtained by treating patients on the general principles appropriate to fevers which must run their course, which we have just sketched. The bowels were kept open and the kidneys active by the use, from the beginning to the end, of the the Hyposulphite of Soda. An ounce of this salt was dissolved in eight ounces of water and a tablespoonful given every four hours. The patient was kept well covered with blankets and a gentle sweating encouraged by the use of Orange Leaf or Horse-mint tea. Besides this, keeping the patient in bed during the stage of calm and giving liquid nourishment and stimulants and tonic doses of Quinine, constitute the treatment. An almost universal fatality was reduced to a fatality of one in ten in whites, two in fifteen in mulattos, and one in thirty-six in negroes. Getting up, or eating solid food of any kind during the disease, which patients desire to do during the stage of calm, is almost always fatal.

#### HOMŒOPATHIC TREATMENT.

All through this work numerical comparisons have been steadily avoided, but on account of the thorough reliability and the broad extent of country covered, we think we may be excused for thus presenting these statistics, when it is so evident that it will be the means of saving *very many* valuable lives. The treatment here following has been thus proven, and if these remedies are given in time (as they will be where this work is owned) and the full directions followed, the deaths from this terrible destroyer and foul plague of all hot climates, will, we confidently believe, be reduced below 3 per cent of all persons attacked with the disease. We quote again from the before-mentioned report:

On analyzing the reports handed into us, we ascertained the following facts:

We have here 1,945 cases of yellow fever treated homœopathically in the City of New Orleans, with a loss of 110 patients, a mortality of 5.6-10 per cent.

We have 1,969 cases of yellow fever treated in cities and towns outside of New Orleans, with a loss of 151 patients, a mortality of 7.7-10 per cent.

This makes a total of 3,914 cases of yellow fever treated homœopathically, during the epidemic of 1878, with a loss of 261 patients, a mortality of 6.6-10 per cent.

We have, moreover, reports of 555 cases treated homœopathically in the great epidemic of 1853, with a loss of 33 patients, a mortality of 6 per cent.

Also, reports of 2,100 cases treated during the several minor and much milder epidemics which occurred between 1853 and 1878, with a loss of 66 patients, a mortality of 3 7-10 per cent.

Making a grand total of 6,569 cases treated by homœopathic physicians, with a loss of 360 patients, a mortality of 5 4-10 per cent.

The number of cases reported as occurring in 1878, among negroes, including mulattoes, was exactly 900—with a loss of 27 patients, a mortality of 3 per cent.

Some physicians did not distinguish between their patients as to race or color. The number distinctly reported as white was 2,299, of whom 194 died, a mortality of 8 4-10 per cent. This includes the returns from points like Memphis or Chattanooga, where the fever was very malignant and the mortality very great. In four of the New Orleans reports, 1,076 patients are described as being white, of whom 66 died, a mortality of 6 1-10 per cent.

The number of cases distinctly reported as colored in the city of New Orleans, was 107, of whom 3 died, a mortality of a little less than 3 per cent.

The total number of cases reported as being under 15 years of age, is 1,089, of whom 48 died, a mortality of 4 4-10 per cent.

The total number of recoveries after black vomit was 125. This dreaded symptom, formerly considered so fatal, has been growing less and less so since the epidemic of 1853, and a great many recoveries have been recorded during the late visitation by gentlemen of both Schools. Children seemed to have it more frequently in proportion to numbers, and to recover from it more readily than adults. We must not forget that there are various shades and degrees of black vomit. Blood more or less blackened by the acids in the stomach, may have been quite healthy when exuded from the mucous membrane of that organ, and be far less prognostic of danger than that sooty, coffee-ground substance, the genuine black-vomit, which shows under the microscope a chemical destruction and disintegration of the blood-globules.

Among these returns are nine papers to which we attach especial value. These comply fully with the request of the circular letter, to give not only cases and deaths, but the name, age and address of every patient attended, so that with these documents in our hands, we can verify every statement, and challenge comparison with any member of the Allopathic School who can furnish us with similar accurate data.

These returns exhibit an attendance upon 2,010 cases of yellow fever, with a loss of 129 patients, a mortality of 6 4-10 per cent. There were 64 recoveries after black vomit. The number of children under 15 years of age amounted to 828, of whom only 40 died, a mortality of 4 6-10 per cent.

#### HOMEOPATHIC TREATMENT.

ACONITUM has been named as the most direct and positive remedial agent in the early stage of yellow fever; and, indeed, its specific effect upon the human economy in a healthy state, especially under conditions

of temperature provocative of the generation of fevers of this kind, tends greatly to confirm this opinion. In case of an attack of fever of an inflammatory character, whether it be apprehended that it may resolve itself into this form or not, the prompt administration of Aconitum can only have been productive of benefit.

*Dose:* Six pills in a teaspoonful of water, or dry on the tongue, repeated, after the lapse of one or two hours, and subsequently, at intervals of one, two, three or four hours, until the fever symptoms abate, the breathing becomes less laborious, and the pulse more regular, or less quick and frequent. But if symptoms of severe exacerbation should threaten to succeed, notwithstanding the administration of Aconitum, proceed promptly with such of the subjoined medicines as may offer the closest analogy to the case.

BELLADONNA may prove of much service after the previous administration of one or two doses of Aconitum, for the treatment of those cases (during the first stage) which attack young, full-habited subjects, with very marked and predominant brain-symptoms. It is useful in the first or second stages.

*Dose:* As directed for Aconitum.

BRYONIA may be called for in the first, or even in the second stages, where Aconite or Belladonna have not sufficed to allay the symptoms. It is more particularly indicated when the pains assume a rheumatic character, and all the symptoms are aggravated by motion.

*Dose:* As directed for Aconitum.

ARSENICUM. Faintness, depression, nausea with intense burning in the region of the stomach, increased by pressure; violent vomiting of brown turbid matter, mixed with mucus, and sometimes stained with blood. Pulse small, frequent and irregular; skin cold and clammy in the stage of collapse, at other times it is very hot; breathing feeble and accompanied with sighing; great nervous irritability; intolerable pain in the bowels, with dark or bloody stools; great emaciation; want of sleep; urine scanty, high-colored, and passed with an effort; delirium; jerking; coma; convulsions; *thirst frequent*, but usually for the moment satisfied with a small quantity of water.

*Dose:* Six pills in a little water, or dry, every one to three hours, or in severe cases, every ten or fifteen minutes.

CROTALUS has been employed in some cases with very marked success, all danger having been subdued after a few hours, even in cases which had reached the fully developed third stage. It is more especially indicated by the hemorrhages occurring from the eyes, nose, mouth, ears, stomach and bowels.

*Dose:* As directed for Arsenicum.

ARGENTUM NITRICUM has been employed in some cases, with good effect, where the patient is sinking, the vomiting becomes worse, with brownish stains in the matter ejected, or other evidence is given of effusion of blood upon the mucous lining of the stomach.

*Dose:* As directed for Arsenicum.

PULSATILLA, Mercurius, Nux-vomica, Acid-nitricum, and China may prove of service in the first or second stages, more particularly, and

Cantharis, Digitalis, Carbo-veg., Croton-tiglum, Rhus-tox., and Veratrum-album, in the second and third stages, more particularly. The selection should be guided, in each case, by the analogy existing between the symptoms of the disease, and those which are specific to each of these medicines, as found by the appended "REPERTORY."

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## ASIATIC CHOLERA—MALIGNANT CHOLERA.

### EPIDEMIC CHOLERA.

This virulent disease generally commences with giddiness, headache, singing in the ears, and uneasiness, a sensation of flatulence in the stomach (rumbling of wind), or griping pains, rapid loss of strength, and a feeling of weight and oppression in the region of the heart. In the severest forms of the malady the patient suddenly falls senseless to the ground, as if struck by electric fluid. But in many instances, diarrhœa is the first symptom, which, if neglected, soon becomes associated with vomiting, severe colic, cramps or convulsions, anxiety, and dread of dissolution which appears to be inevitable.

In some, though not all, cases of Asiatic Cholera, we find the lips, nails, and sometimes the whole skin, of a blue color, but in almost every instance, the frame loses its power of generating heat, the pulse and pulsation of the heart are almost unfelt, and the circulation of the blood becomes stagnant.

Patients who have outlived the second stage sometimes fall victims to a secondary typhoid fever in the third.

**PREDISPOSING CAUSES.**—The predisposing influences are: intemperance in eating and drinking; insufficient of or cold, indigestible fruit and crude vegetables; cold drinks when the body is overheated; exposure to exhalations from decayed vegetable or animal matter; residence in low, damp, dark, ill-ventilated dwellings; excessive fatigue; suddenly suppressed perspiration; sudden mental shocks, or moral emotions as fright, fear, grief, and especially passion; neglect of cleanliness, both personal and domestic; constitutional debility, serious derangement of the digestive organs, weakness of the bowels, etc. As any, or, at all events, several of these in conjunction, tend to favor the invasion of the disease, they ought, when practicable, to be carefully guarded against or removed.

**EXCITING CAUSES.**—These are generally said to depend upon some peculiar atmospheric conditions. But it is to be remarked, that such atmospheric conditions (properly so called—in contradistinction to the many other immediate causes of disease, with which the atmosphere may be impregnated), do not appear necessarily to involve whole regions or even extensive tracts of country. Cases are not wanting, especially in tropical climates, in which this disease, in all its distinctive features, has occurred almost in isolated instances, or has been confined to particular spots.



## ALLOPATHIC TREATMENT.

In the treatment of epidemic or asiatic cholera, this much appears to be settled, that upon the appearance of the diarrhœa which is preliminary to the disease (Cholérine) the patient takes to his bed and remains there; this is essential to success. The remedy which is best suited to control the preliminary diarrhœa, is Opium. Strychnine. Sulphuric Acid, Chloroform and Camphor have been found useful. The following formula is found useful during this stage. Take a fourth of a grain of the Sulphate of Strychnine, Aromatic Sulphuric Acid half an ounce, Sulphate of Morphine two grains, Camphor Water three and a half ounces. Mix; a teaspoonful well diluted; may be given every one, two or three hours according to the severity of the diarrhœa. The plan of checking the diarrhœa by a full dose of Opium varying from a quarter of a grain, to one grain of Morphine, according to the severity of the diarrhœa. The continued use of the above mixture would then be appropriate. But return or increase of the symptom should be met with another full dose of Opium after an interval of not less than an hour. The bowels should move in a bed-pan, the patient not being allowed to rise to stool. The stools should be buried and the vessels thoroughly washed and disinfected by keeping a solution of Permanganate of Potash or Carbolic Acid in them. The floor may be sprinkled with Labarraqu's Solution, or a solution of Carbolic Acid one part to forty of water.

The food, when there is diarrhœa, should be composed of farinaceous articles, milk, and beef tea.

The drink may be Sulphuric Acid Lemonade, using for a change, and to gratify the taste, plain water, cold tea, or milk and water.

Hot poultices or mustard plasters may be applied to the abdomen to relieve pain.

When vomiting and purging occur there appears to be no remedy more generally useful than Chloroform given in doses of five to ten drops every half hour or hour. It relieves the vomiting, pain, and spasms. Lint saturated with Chloroform laid over the stomach and covered with oiled muslin will aid in controlling the vomiting.

When collapse occurs the Opium and Strychnine before appropriate are not to be given because they may not be absorbed, and when the patient rallies from the collapse (if he does) there is danger from an over dose by accumulation in the stomach.

The use of Chloroform may be continued in five to ten drop doses or teaspoonful doses of Spirits of Chloroform (Chloroform one part to Alcohol twelve parts) every half hour or hour may be continued.

The benefit of that variable mixture called Chlorodyne depends largely upon the Chloroform it contains. Brandy or Whisky and water should be given as freely as the stomach will retain them, in small quantities at a time.

The thirst may be relieved by water rendered slightly sour by the addition of ten to thirty drops of Aromatic Sulphuric Acid to a glass of water. Ice water may be taken in small quantities or simple water may be used. Water is not harmful, if it does not provoke vomiting. Small lumps of ice may be given.

Concentrated nourishment as milk and meat essences should be frequently given in small amounts (with whisky or brandy, or without) if the stomach does not reject it.

The remedy which has yielded the best results in the stage of collapse or when it was approaching, is the Hydrate of Chloral given by hypodermic injection, from five to ten grains in solution in water being the dose given at intervals of half an hour to an hour or two. It is often advantageously given with Morphine in doses of from an eighth to a quarter of a grain.

The surface of the body should be kept warm if possible by dry heat, such as hot flannels, bottles of hot water, etc. It is not desired to occasion sweating but perspiration should be wiped off with warm dry cloths.

Injections of warm water or injections of whisky with warm beef tea are permissible. The latter has been known to avert an approaching collapse and arrest the diarrhœa.

If the patient rally from the collapse the cautious use of nourishment and stimulants as directed for typhoid fever are indicated. If the kidneys do not act freely they should be stimulated by the use of half teaspoonful doses of the Vinegar of Squills in a dessert or tablespoonful of Infusion of Digitalis four times a day, and bland drinks such as flaxseed tea or barley water. If coma (insensibility) the hot air bath should be resorted to to throw off the urea by sweating. The danger of uræmic poisoning is averted by getting the kidneys to acting freely. Tonics should be given. For this purpose there is none better than two or three grains of Quinine given four times a day.

Thorough cleansing and disinfection of buildings and surroundings, having privy vaults, drains, and vessels which receive excretions, house waste, etc., contain disinfectants, no filth of any kind being allowed to accumulate, the severe ravages of the disease may be prevented.

### HOMŒOPATHIC TREATMENT.

The success of treatment much depends upon the promptness with which remedial resources are exhibited, upon the earliest recognition of the attack.

TINCTURE OF CAMPHOR, if administered upon the *earliest* premonitory indications of the attack, will often avail to prevent the further development of the disease, and will at all events, in the great majority of cases, avert fatal consequences. The following are the particular indications in the early stage—chilliness, shivering, giddiness, headache, singing in the ears, pain, weight, pressure, or a distressing sensation in the pit of the stomach, cramps with protracted rigidity in the calves of the legs, sensation of general uneasiness, sudden loss of strength;—sunken, blue-encircled eyes; diminution of the senses; slow, or scarcely perceptible pulse; blueness and icy coldness of the face and hands, and greatly diminished temperature of the whole body; burning heat in the throat and region of the stomach; distended bowels; much flatulent rumbling; nausea and even vomiting, and diarrhœa; diminished or suppressed urine (an almost constant symptom in Cholera); hoarse voice;

countenance expressive of excessive anguish ; suffocating oppression. After taking Camphor sweat soon breaks out as a sure sign that an improvement has commenced. Then the remedy must be given less frequently and in smaller doses, or it may give rise to congestion of the brain.

*Dose :* Take of the purest loaf-sugar, or of sugar-of-milk, *finely pounded* just a sufficiency, upon which deposit one drop of the tincture thus administering the dose, and repeating such dose, at first every five minutes extending the intervals according to the duration of the intermissions between the spasmodic attacks, only repeating the administration as the attack returns, and continuing this course until positive amelioration or change. Decided improvement is readily distinguishable : first, by increased warmth, and, shortly, by diminution of anxiety, by comparatively healthy perspiration, and by an inclination to sleep. After sleeping an hour or two the patient awakes with a sensation of ease, which he can scarcely believe.

VERATRUM (especially under the particular circumstances just enumerated) should be employed without a moment's delay, when Cholera sets in in its worst and characteristic form, with sudden and violent fits of VOMITING and PURGING, the evacuations resembling starch or rice-water, after several paroxysms ; flatulent rumblings, excruciating gripes, severe cramps (either with protracted rigidity, or with rapid alternations of contraction—particularly the latter) in the calves of the legs, etc., (second stage), ice-like coldness of the entire body, even of the tongue, cold, clammy sweat, suppressed respiration, feeble pulse, great thirst—the patient, if permitted, drinking large quantities of water—excessive weakness, terrified look, weak hollow voice, groaning and yawning.

*Dose :* Six globules in a teaspoonful of water, every quarter of an hour (in extreme cases) or every half hour (in less urgent circumstances), or even in some very desperate cases, and when a fatal issue seems imminent, every five minutes,—until the extreme severity of the symptoms becomes somewhat abated ; and, subsequently, every time the paroxysms return, and so on until the symptoms yield or change.

ARSENICUM ALBUM displays its curative action in those terribly rapid cases where cholera algida at once sets in without any premonitory symptoms. The most essential indications for Arsenicum are : Sudden and complete exhaustion, vanishing of the pulse, together with violent palpitations of the heart, great dyspnœa, inexpressible anguish, constant tossing about, horrid thirst, yet the least quantity of liquid is vomited up again immediately ; burning distress in the region of the stomach and upper portion of the bowels ; complete suppression of urine. In such cases Arsenicum should be given at once, without any other medicine being resorted to in the first place. After the exhibition of Arsenic the urine is often secreted in large quantity, a very favorable change.

*Dose .* Six pills in a teaspoonful of water, every quarter of an hour (in urgent cases), or even every five minutes (when a fatal issue appears imminent), or only every half hour (in cases of a less desperate character), until the symptoms are modified, and the sufferings are not so incessant ; then extending the intervals according to the duration of the periods of remission between the paroxysms, and so on, until positive change.

ACONITE is a splendid remedy if, in the beginning, or after the blue cold stage, there is heat of the skin, quickness of the pulse, headache, noise in the ears, dryness of the tongue with craving thirst, this remedy should be given in small doses—six pills every ten to thirty minutes.

On the other hand, when the skin is cold, clammy and livid, the pulse not perceptible at the wrist, the action of the heart quite feeble and irregular, the head cold, the pupils of the eyes dilated very much, and not sensitive to the effects of light, involuntary discharges from the bowels of a thin stool resembling rice-water, vomiting of a similar substance, the dose should be large—twenty drops of the Tincture of Aconite, in a glassful of water, to be given one teaspoonful every fifteen to sixty minutes.

CARBO-VEG. may often be advantageously employed after the previous administration of one or more of the preceding medicines, or even in alternation with Arsenicum (in some cases) when the patient is reduced to the last extremity, animation being all but completely suspended, and the pulse scarcely perceptible; or when, on the cessation of vomiting, purging, and cramps or convulsions, determination of blood to the head and chest ensues, attended with oppressed breathing, coldness of the breath, redness or *livid* hue of the face (which is covered with clammy sweat) and lethargy—the patient seeming as if seized with an apoplectic fit. Also when every sign of reaction has been extinct from the beginning.

*Dose:* Six pills in a teaspoonful of water (or,—if there be difficulty in ensuring its being swallowed thus—*dry* on the tongue), at intervals of five, ten, and fifteen minutes successively, and then (if the pulse become stronger) every half hour until positive change. But if, upon the development of stronger pulse, and the subsidence of the lethargic symptoms, the pain, vomiting, cramps, etc., should return, at once resume the administration of Veratrum, as before.

#### ADDITIONAL PARTICULARS.

IPECACUANHA, NUX-VOMICA. These remedies (the first either singly or followed by Nux-v.) have been found efficacious either before or after the previous administration of the other medicines (generally when more urgent symptoms had been overcome), or at the onset of the attack (in milder cases), when such indications as the following could positively be identified.

IPECACUANHA may be administered under circumstances such as those just stated, either after previous treatment, when the vomiting becomes a prominent symptom, and the discharge attending it is more copious, or at the onset of the attack when the vomiting (being copious, and attended with much nausea) predominates, so as to characterize the case distinctly. Further indications for this remedy are such as the following:—sensation of weakness (or of internal sinking), coldness of the face and limbs, sensation of shivering in the belly, slight cramps in the calves of the legs and in the fingers and toes; or sometimes, again, vomiting, alternated with watery diarrhoea, accompanied with or preceded by griping, colicky pains; or even yellowish diarrhoea in some cases in which the vomiting does not occur; or loose evacuations of excremental



matter mingled with slime (at the commencement of the attack), or evacuations of a greenish or brownish character.

*Dose:* Of a solution of twelve pills to four table-spoonsful of water, give a teaspoonful every hour, until change. But if, after the more violent symptoms (the vomiting especially) have yielded in a degree to the action of Ipecacuanha, pause three hours, and proceed with the next medicine, if the subjoined symptoms remain.

NUX-VOMICA may be employed with great advantage three hours after the last dose of Ipecacuanha, when the vomiting has subsided under the influence of the last-named medicine, but symptoms of spasm of the stomach remain, such as weight and constriction in the region of the stomach; or again, when anxiety, great debility, griping, frequent, small evacuations with much straining, frontal headache, or aching pain at the back of the head, and shuddering, with predominant internal chill, continue to prevail.

*Dose:* Of a solution of six pills to two table-spoonsful of water, give a teaspoonful every hour, until the symptoms abate; and then every three hours, until positive change.

CICUTA-VIROSA has proved an appropriate remedy, when there are spasms in the muscles of the chest, continuous vomiting, and little diarrhoea, when the eyes are turned upwards, and the patient is in a drowsy state.

*Dose:* Six pills in a teaspoonful of water, (or, if there be difficulty in this method, *dry* on the tongue), every ten minutes, until the symptoms abate, and then every half hour, until positive amelioration or change.

#### TREATMENT OF THE AFTER-EFFECTS OF CHOLERA.

CARBO-VEG., is of much service in the stage of convalescence when flatulent rumblings and the colic with diarrhoea and excessive flatulence during stool remain.

*Dose:* Four pills in a teaspoonful of water every hour, or after every intestinal evacuation, until a degree of improvement becomes apparent, and then every twelve hours.

PHOSPHORUS is very useful when debilitating diarrhoea remains after the removal of the more urgent symptoms, and particularly when the stools are watery, and sometimes productive of an acrid, pungent sensation in the last intestine, and attended with belching, weight or oppression at the pit of the stomach and lateral regions (without the heat or burning which accompanies this symptom in the cases that call for the employment of Arsenicum), and pain in the region of the navel, rumbling noise in the bowels, either at other times or on pressing the hand against the belly, pricking or shooting pains in the left side of the chest, etc. Phosphorus is also useful when a tendency to vomit remains, but with the distinctive indication that it only occurs about a quarter of an hour or so after drinking, or when the cold fluid drunk has become warm in the stomach. Again, it is a remedy of much importance in the event of congestion in the chest, with oppressed and laborious breathing, in addition to the before-mentioned symptoms during the course of the disease.

*Dose:* Four pills in a teaspoonful of water, every three hours (or every hour in more urgent cases) until the symptoms abate, and then every six hours.

**ACIDUM-PHOSPHORICUM** should be administered either after the previous use of Phosphurus, or even before it, in the event of the tongue becoming exceedingly clammy or slimy; or again, if colliquative diarrhœa should ensue with or without the typhoid or congestive symptoms hereafter described; or when the dullness of the head and pallor of the face occur; or the evacuations are watery or slimy; or exhibit a greenish-white hue, and there is inadequate discharge of urine.

*Dose:* Of a solution of six pills to two tablespoonsful of water, give a teaspoonful every two hours.

#### ACCESSORY TREATMENT.

The patient should be kept in a room of a warm temperature, the bed should be heated by artificial means,—bottles of hot water applied to the feet, if necessary, and hot flannels to other parts of the body. The observance of this rule greatly facilitates the action of the medicine employed. Enveloping the patient in a damp sheet (one which has previously been soaked in warm water), and then wrapping him in blankets, is another useful auxiliary mode of treatment. Frictions with woolen cloths, and the act of rubbing and pinching, under the bedclothes, the parts affected with spasms, have also been recommended; but if these auxiliary measures prove distressing to the patient, he should be left quietly under the action of the medicine. Anything which might disturb the equanimity of the sufferer, such as noise or contradiction, should be carefully avoided, and his spirits should be sustained as much as possible.

**FOOD AND DRINK.** Cold water is the best drink, but the patient should not be allowed to take too much at a time; the occasional administration of a small piece of ice, if possible, or of iced water in teaspoonsful is often attended with benefit; and injections of iced water are sometimes serviceable in relieving the colic and cramps in the intestines,—or of starch-water in the case of straining. When cold water, in lieu of diminishing, increases the vomiting or other sufferings, and the patient expresses a wish for a little nourishment, tepid emulsion of sweet almonds, thin gruel, barley-water, toast-water, milk and water (all warm and given in teaspoonsful at a time), may be administered.

During the convalescence following this disease, we must be careful not to indulge the patient to the full extent of his desires. It is therefore advisable, when the appetite returns, to commence with Semolina, Sago, Arrowroot, and such like, as also Cocoa, chicken-broth, or beef-tea; but great caution must be observed, in order to avoid the risk of a relapse from an undue amount of nutriment. This is best accomplished by the administration of a tablespoonful every hour, or only every two or three hours—diminishing or gradually augmenting and varying the quantity and quality of the food, according to the effects produced.

#### GENERAL ACCESSORY PRECAUTIONS.

Care ought to be taken to avoid excesses of all kinds, late hours, exposure to night air, melancholy thoughts, or fear, which are all predisposing causes to attacks of this malady.

Pure air and thorough ventilation are indispensable, and the precaution of providing a free current of water through all drains, etc., is not

to be neglected. If it be known that stagnant or obstructed drains, cess-pools, and the like, are distributing noxious exhalations about a dwelling, the safest course is (if possible), to remove to another locality, the next, to endeavor to neutralize the poison which is given out by these decomposed deposits, by means of chloride of lime or peat, charcoal, etc. It is, however, very hazardous to set about *removing* such nuisances *during* the prevalence of the epidemic; this should have been done *before*, or should generally be left until afterwards, and when there is no longer reason to apprehend the distribution of additional causes of disease; a *keen frost* may render the cleansing of foul places comparatively safe.

Regular exercise should be taken during the best part of the day (in fine weather) in the open air, but excessive fatigue should be avoided.

#### PRESERVATIVE MEASURES DURING THE PREVALENCE OF CHOLERA.

Accurate observance of the Homœopathic Preventive Regulations will in a very great number of cases avert the attack altogether. But even if this should not be the case, the disease will in general be developed in a very modified form, and such as will usually be readily subdued by the employment of Camphor (as heretofore directed at page 597.) In some few cases, further treatment may become necessary, according to the directions stated in the foregoing portions of this article, but there will rarely be reason to apprehend a serious issue. See, also, Veratrum.

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## CHAPTER XXX.

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### CONSTITUTIONAL DISEASES WITHOUT DEFINITE INFECTION.

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#### ACUTE ARTICULAR RHEUMATISM.

##### RHEUMATISM OF THE JOINTS.

This form of rheumatism often arises from a cold and from exposure to atmospheric influences; it not unfrequently assumes an epidemic type, and, in such a case, breaks out most commonly in the fall and winter.

The disease commences very gradually with a vague feeling of fatigue, accompanied with slight catarrhal symptoms; it may break out after severe attacks of angina, very seldom suddenly, and scarcely ever with a chill, but with alternate chills and heat. Simultaneously with the fever, very seldom after, and still less seldom before, one or more joints become painful; the pain rapidly increases, and the joint swells, sometimes with, and at other times without redness; at this period, the least motion and the least pressure cause pain, so that the patients remain perfectly quiet

for fear of hurting themselves. Generally, several joints are attacked at once, very seldom only one at a time, never all the joints at once from the start. The disease progresses in a very characteristic manner. While the joint that was first attacked, is getting better in three to five days, sometimes with a complete cessation of the pain, as well as the swelling, other joints are attacked in the same manner; in this manner most of the other joints are invaded, after which the rheumatism frequently breaks out again in the joint whence it had originally proceeded. At times the swelling is quite considerable, at other times scarcely perceptible; sometimes it is confined to the joint alone, at other times the surrounding parts are very extensively involved; not unfrequently the articular extremities feel enlarged. The constitutional symptoms are at times very violent, at other times very slight; this depends a good deal upon the number of joints involved. The fever runs pretty high, remitting very irregularly; the temperature is not much raised above the normal level; pulse about one hundred, in very acute cases increasing very seldom to one hundred and twenty and upwards, small and changeable; a copious perspiration, having a musty-sour smell, continues during the whole course of the disease, corresponding with which the patients are tormented by a distressing thirst. The urine is very scanty, saturated, and, on cooling, deposits a copious sediment. The digestion is slow, the appetite impaired, but very seldom entirely suspended.

The course of uncomplicated rheumatism is never very rapid, generally more or less wavering; recovery takes place gradually; single joints may remain painful and swollen for a long time, the pulse remains obstinately accelerated, the perspiration continues, the weakness abates very slowly. A favorable change takes place very seldom after the first week, a little more frequently after the second, but most commonly only after the third and fourth week. Very often we have noticed that, before the disease terminates, every joint is attacked twice, and that the second attack only lasts half as long as the first. In violent cases all the joints are affected together at the termination of the attack, some, however, are more acutely inflamed than others.

With proper management and care this form of rheumatism ends in recovery in one week at the latest. However, by neglecting to guard against relapses, an acute attack may very easily terminate in a chronic form, and contractions and paralytic conditions may arise which can only be removed with great difficulty.

#### CHRONIC ARTICULAR RHEUMATISM.

It most frequently develops itself out of the acute form of which it constitutes a rest as it were; it likewise arises from the continued action of damp and cold places.

Chronic rheumatism is less frequently located in the external integuments of the joints where acute articular rheumatism is generally seated, than in the synovial (inner) lining, the ligaments and articular cartilages. Little by little these grow thicker and rough. The disease seldom involves a number of joints; generally it is limited to one or a few only. Neither the swelling nor the pain is very considerable; to some extent the power of motion remains, yet the patients may be entirely



deprived of the use of the affected limb, while the rest of the body is perfectly sound. The rheumatism has remissions followed by exacerbations, each of which leaves the joints somewhat worse. These exacerbations often look like an attack of acute rheumatism, with fever and slight inflammation of the affected part; sometimes, however, they are without fever, and distinguished only by pain and loss of mobility. Chronic rheumatism sometimes remains after repeated attacks of acute rheumatism of which it seems to constitute the ultimate stage. The joint is not greatly distorted by the disease. A complete cure is very much impeded by the extreme obstinacy of the trouble, and likewise by the impossibility of preventing the joint from being acted upon by influences that never cease, by their presence, to perpetuate the disease.

#### DEFORMING RHEUMATISM.

##### *Arthritic Rheumatism.*

This form of articular rheumatism always runs an exceedingly chronic course; it does not develop itself out of the acute form, occurs very rarely previous to the thirty-fifth year of age, and is most frequent after the fortieth year. It breaks out among all classes, especially, however, the lower; on this account it is very difficult to determine the degree of influence exerted by bad food or damp dwellings over this disease. Arthritic rheumatism affects more particularly the female sex; the critical age undoubtedly favors an outbreak of this disease, for we meet with it most frequently about this time.

This may attack any joint in the body, but it is mostly limited to the joints of the hand and feet, affecting both sides of the body at the same time. It generally commences in the hand, whose joints become more or less painful, especially when they are moved or pressed upon laterally. Sometimes the pain is principally felt in bed. The joint swells very slowly; at times long intervals occur in the further continuance of the swelling, after which the arthritic process resumes its course amid renewed paroxysms of pain. Towards the end the shape of the joints is very much altered, especially the shape of the finger joints. They look bulbous, they are especially enlarged in breadth; they feel hard; their integumentous covering has a natural color. The power of motion is not entirely suspended, but motion is very painful; in the very highest grades of the disease the joints are entirely immovable. Life is not endangered by this condition, but its curability is very doubtful. The swelling never disappears entirely; all that can be properly aimed at by treatment, is to arrest the further progress of the disease.

#### ALLOPATHIC TREATMENT.

In the treatment of inflammatory rheumatism or rheumatic fever, no active single remedy has afforded such good results as Salicylic Acid. Its effectiveness in this disease above all others has caused the repute of the drug. The fever is not unfrequently corrected in forty-eight hours. While not every case is so favorably influenced, yet it exerts a remarkable power in greatly modifying the disease, lessening the fever, pain, and swelling.

Fifteen to thirty grains may be given in medicine wafers or capsules, every hour until the fever and pain abate, when the medicine may be continued in doses of ten to fifteen grains every three or four hours for several days. It is claimed that in some instances these large doses cause sickness of the stomach and prostration like collapse, which may be avoided by combining the acid with one-fourth its quantity each of Bicarbonate of Soda and Carbonate of Ammonia. The formula of Bri-deaux is: Take of Bicarbonate of Soda, Carbonate of Ammonia, each five grains, Salicylic Acid twenty grains, Water one ounce. Mix. For one dose. Much the pleasanter way is to take the Acid in capsule or wrapped in medicine wafers.

Fifteen grains of Salicine (active principle of Willow Bark) every three hours will often give relief within forty-eight hours. It can be given in capsule or wafer or mixed in water. It should be used provided Salicylic Acid is not given.

A well tested and beneficial plan of treatment is known as the alkaline treatment. A solution of a teaspoonful of Bicarbonate of Potash should be made in a quarter of a glass of water; to this is added a tablespoonful of a solution of half an ounce of Citric Acid in four ounces of water and drunk during effervescence. More water may be used if desired. This should be repeated every three hours until the urine has become alkaline (as ascertained by testing freshly voided urine with litmus paper) or the fever has abated, then once in six hours and after three or four days twice a day will be sufficiently often to keep the urine alkaline. After the violence of the symptoms has subsided if anæmia (impo-verished blood and feebleness) exist, the Bicarbonate of Potash should be discontinued, and twenty to thirty drops of Muria-tic Tincture of Iron, largely diluted in water, and ten grains of Iodide of Potash, at different times should be given six hours apart.

It is only fair to add that the benefit of the alkaline treatment which has such earnest advocates, is also seriously questioned by some who claim better results by some of the other methods of treatment, such as blisters cold baths, and Quinine.

The Chloride of Trimethylamine in doses of two grains every three hours is claimed to moderate the fever and pain immediately and moderate and shorten the disease. Take of Chloride of Trimethylamine sixty-four grains, Peppermint Water thirty-two drams. Mix.

*Dose:* A teaspoonful. This drug, if used, should be given alone.

Prof. Da Costa recommends ten grains of the Bromide of Ammonium every three hours. It can be given in water flavored with Tincture of Orange peel.

Quinine is useful in maintaining the reduction of heat produced by a cold bath, if given in a dose of twenty grains upon taking from the bath but it seems to the writer that a more effectual plan is the repeated application of the wet sheet and the use of Aconite. There is no doubt of the benefit of Quinine or some other preparation of bark as a tonic in doses of two or three grains four times a day, after a few days have passed. Large doses of Quinine have been thought to be curative. It has not proved so in the common experience of the profession.

In patients having a high fever and a strong pulse, the Tincture of Aconite may be given in doses of half a drop every hour or two to maintain an impression on the fever and to moderate the pulse until such a time as the fever spontaneously subsides, or is prevented raising by the effect of one of the curative remedies before given, viz: Salicylic Acid, Salicine, or Alkalies, etc.

In those cases having a sudden rise of temperature to 105° or 107° or more (above which a fatal result is to be expected) the most effectual and speedy method of reducing the fever is by the cold bath as directed in typhoid fever. By promptly reducing the fever in these extreme cases life may be saved. While this danger seldom occurs in this disease it should be promptly resorted to if required.

Blisters are often applied around the affected joints, followed by poultices to keep up the discharge, or a small blister one or two inches square, which is allowed to heal, and another one immediately applied. This is called the flying blister. The preferable local application seems to be the outer, and used in his practice, is hot packing of the affected joints, wrapping them with flannels wrung out of hot water, and thickly covered in. Cloth saturated with an Alkaline and Opium Solution, similar to that recommended by Fuller may be wrapped about the joint with benefit. Take of Carbonate of Potash six drams, Laudanum one ounce, Glycerine two ounces, Water nine ounces. Rubbing the affected joints carefully with a liniment of one part each, of Chloroform and Tincture of Aconite, and two parts Soap Liniment, will afford relief.

Through the whole course of the disease, Opium given to the extent of relieving pain, is most happy in its effects. Two grains of the solid Extract with a third of a grain of the Extract of Belladonna in pills may be given at night if the pain is very severe, and repeated during the day in doses of half this amount, at such intervals (three to six hours) as will make the pain tolerable, until it disappears in the course of the disease, or under the effect of one of the three curative remedies mentioned above.

Constipation should be relieved by half teaspoonful doses of the Wine of Colchicum six hours apart, until the bowels are moved, Cathartics are not needed.

The Appetite should be gratified, and encouraged by nutritious diet.

The patient ought to lie between blankets, and wear flannel garments, if any next to the skin, during the whole course of the disease.

During the latter part of the disease tonic doses of Quinine, three grains four times a day, or equivalent doses of some other preparation of Cinchona Bark are advantageous.

The Salicylic Acid, Saline, and Alkaline treatments, are said to prevent heart complications, hence, in part, is the prompt and bold manner with which they are recommended to be given.

Should violent and irregular action of the heart, friction sounds, pain in the region of the heart, enlargement of the area of dullness on percussion, difficulty of breathing and increase of fever occur in the course of the disease, the dangerous complication, pericarditis, has occurred. Full doses of Opium are to be given.

The treatment before recommended for the rheumatism should be

continued. Large hot poultices of flaxseed meal and mustard should be kept over the region of the heart.

If the action of the skin and kidneys is not sufficient, the hot air bath should be given.

Particular attention should be given to nourishing the patient. Milk, raw eggs beaten with milk or water, and strong beef tea or essence, should be freely given.

When symptoms of weakness occur, stimulants should be given as are directed in the treatment of typhoid fever.

The treatment of pericarditis has been more fully considered elsewhere.

In chronic rheumatism of the joints, attention should be given to the general health, and measures employed to restore it to its fullest vigor. To this end, good food should be taken, avoiding sugar and starchy food, while milk, cream, eggs, and fruits may be freely taken.

The Citrate of Iron and Quinine, in solution, in doses of three to five grains, will be serviceable.

It is claimed by good authority that the Tincture of Chloride of Iron is curative in acute rheumatism, and another equally high authority claims it to be a preventive of rheumatism. It is equally worthy of a trial in the sub-acute or chronic form. The dose is twenty to thirty drops largely diluted in water, every six hours (four times a day). It will be especially serviceable if the system is debilitated.

Iodide of Potassium, in doses of ten grains dissolved in water (Peppermint or Sarsaparilla covers the taste), three times a day, frequently is very beneficial. A better effect is sometimes produced by giving five drops of Fowler's Solution with the Iodide of Potassium.

The remedies so useful in acute rheumatism are not so appropriate in this, though they may be tried.

Alkalies are required if the urine is acid, but they should be given more moderately. While Salicylic Acid has succeeded in my hands, it has as often failed.

The Hydrochlorate of Ammonia often succeeds admirably in doses of fifteen or twenty grains. It is best given in Elixir of Cinchonia, and given four times a day.

Tincture of Guaiac, or the Ammoniated Tincture, in doses of one or two teaspoonsful three times a day, is one of the most successful remedies. It may be given in milk, or the gum prescribed in other mixtures.

Prickly Ash (*Xanthox Yluin*) has a deserved reputation in this disease; the dose of the Tincture is one or two spoonsful. In domestic use a tea is generally made (an ounce of bark to a pint of tea), and two to four tablespoonsful taken at a time.

Poke-root (*Phytolacca Decandra*) cures some cases of chronic rheumatism. The dose is ten or twenty drops of the Tincture. A tea made, in domestic practice, from half an ounce of the root to a pint of tea, could be given in doses of a tablespoonful.

The waters from Sulphur-springs are helpful in very old cases.



Warm bathing, alkaline bathings, vapor baths, Turkish baths, and the wet pack, are each in their turn useful means of treatment, and should be given a thorough trial in obstinate cases.

The relief of pain is called for in some instances, and should be met, when not afforded by local applications, with Opium—given in half the doses recommended in the acute variety.

Local applications are highly useful. Flying blisters from one to two inches square, and allowed to heal at once, following each other over different parts of the joint, so that a fresh blister always exists on some part of the surface, is one of the best plans of local treatment.

Stimulating liniments are frequently beneficial, as the following:—Take of Ammonia Liniment an ounce and a half, Chloroform half an ounce, Soap Liniment two ounces, rubbing the joint well with it. If the pain is very great, take of Chloroform and Tincture of Aconite each an ounce, Soap Liniment two ounces. Mix. Wet a flannel with the Liniment, apply it round the joint and cover with oiled muslin. Turpentine or Petroleum, well rubbed into the part, or a flannel wrapped round the part, are sometimes useful.

Other useful liniments; Take of Oil of Cajuput and Laudanum each two drams, Turpentine four drams, Ammonia Liniment an ounce. Mix. Or, Aqua Ammonia a dram, Laudanum four drams, Tincture of Cantharides three drams, Soap Liniment ten drams. Mix.

Iodine is one of the best local agents in overcoming inflammation, and removing its products. The tincture may be used, but the following ointment is believed to be preferable, because, after a few applications of the Tincture, a dead scarf skin prevents the penetration of the remedy: Take of Iodine thirty grains, Iodide of Potassium a dram, Water a dram, Lard an ounce. Mix. If this irritates too much, it can be made weaker with Lard.

A certain amount of stiffness, tenderness and inability to use the joints or limbs, is met with in many cases after the inflammation has subsided. This is removed by regular passive motion, *i. e.*, motion by the hands of others, systematic shampooing, kneading and slapping with the hands (called massage). So-called cures of rheumatism effected at this stage by “rubbing,” “slapping,” and “messeuric” quacks.

Liniments are largely useful in this stage, partly because they necessitate a certain amount of rubbing.

Flannel ought always to be worn by those who suffer from chronic rheumatism.

The general treatment of muscular rheumatism is not essentially different from that of chronic rheumatism affecting the joints, and it is unnecessary to describe it here. Absolute rest of the affected muscles is necessary. Pain should be relieved by the hypodermic injection, over the affected muscle, of a quarter of a grain of Sulphate of Morphine with a fiftieth of a grain of Sulphate of Atropine in the acute stage, or of Atropine alone in the chronic disease. Strong mustard plasters should be applied over the painful muscles and immediately upon their removal a hot poultice of flaxseed meal with Laudanum poured over the surface, or

hot fomentations of flannel wrung out of hot water and well covered, to retain the heat.

Rubbing the part and the use of liniments as in chronic rheumatism of the joints is useful. Sometimes the daily use of the wet pack has proved curative. Aside from tonic remedies probably Iodide of Potassium and Guaiacum, as recommended for chronic rheumatism of the joints, and five grain doses of Quinine three or four times a day, are the most frequently curative, especially if pain is periodical.

Persons subject to this affection should wear flannel the year round. The daily use of the cold sponge bath will invigorate the system against liability to cold, while an over quantity of clothing, night or day, is to be avoided. Invigoration of the system, especially by an out of door life, is to be sought for.

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#### RHEUMATISM OF SCIATIC NERVE—ALLOPATHIC TREATMENT.

This affection is a form of neuralgia, but not unfrequently of a rheumatic origin. The remedy which gives the most speedy relief is Morphine by hypodermic injection. A prompt and complete relief of the pain by this means is not unfrequently curative. The injection should be made in the neighborhood of the nerve. The dose to be preferred is a quarter of a grain, which can be repeated in twenty or thirty minutes, if the pain is not relieved.

If the Morphine should not succeed the hypodermic injection of a fiftieth of a grain of Atropine should be made. Relief from it is more apt to be permanent than the same degree of relief from Morphine, but this injection cannot generally soon be repeated, but if the pain is not relieved nor excessive dryness of the throat nor other inconvenience experienced, a second injection may be made, but generally, if the pain is not relieved by the first injection of Atropine, it is best as a rule to resort to Morphine. The injection, under the skin, of fifteen or twenty drops of Ether behind the great trochanter is often followed by quick relief.

Electricity is often beneficial. The direct current should be passed down the nerve. In old cases a needle, such as is used in acupuncture, insulated to near its point, should be introduced to near the nerve and attached to the positive pole. The negative pole is then passed down the course of the nerve. A daily sitting of five to ten minutes is appropriate. The neuralgic form of the disease is more often benefited by Electricity than the rheumatic.

Acupuncture, in old cases, especially in the form originated by Baudenscheid, is sometimes particularly beneficial.

The general treatment is that given for chronic rheumatism or neuralgia, as the affection is of a neuralgic or rheumatic origin. It is not necessary to repeat these directions here.

Iodide of Potassium in doses of ten to thirty grains three times a day; Alkalies; Salicine in doses of fifteen grains, four times a day; Quinine

five grains and Tincture of *Nux Vomica* five drops three or four times a day; or ten to twenty drops of Turpentine with Honey three or four times a day, are particularly recommended in rheumatic sciatica.

The same local measures given for neuralgic and chronic rheumatism are appropriate. In addition may be mentioned as especially applicable a strip of flannel wet with Chloroform, laid over the course of the nerve and covered with oiled silk (or muslin), or the whole limb covered with new flannel which has been thickly sprinkled with sulphur and covered with oiled muslin, are recommended by Fuller. Enveloping the limb is claimed by Trousseau to have cured after blister and Morphine failed. Great relief is sometimes given by blistering the head. Flying blisters as directed in neuralgia are generally beneficial. The actual cautery is recommended.

### HOMEOPATHIC TREATMENT.

*ACONITUM* is the main remedy in acute articular rheumatism, if the pulse is not only frequent but likewise full and hard, the temperature is considerably higher, the joint is red and exceedingly sensitive to contact; it is suitable for nervous, irritable, plethoric individuals; or when heart troubles have set in. Further indications may be gathered from the Repertory. Aconite has been less frequently used in chronic cases where it sometimes acts with great efficacy. Aconite is less adapted to chronic articular, than to muscular rheumatism, especially when the disease is located in the upper extremities.

*BRYONIA ALBA* is a leading remedy for acute and chronic rheumatism, except the arthritic form. It is most suitable for rheumatism caused by exposure to cold and dampness after a severe muscular effort; the violent fever soon weakens the patient; the swelling of the joint is dark-red and exceedingly painful; the respiratory organs show symptoms of inflammation; the perspiration has a sour smell. In muscular rheumatism, *Bryonia* is indicated by the following symptoms: The muscles of the trunk are the seat of the disease, especially the muscles belonging to the chest; the patient feels much better during rest; the pains are severe tearing pains, and incline to shift from one place to another.

*MERCURIUS*. *Mercurius* is not so much adapted to chronic as to most forms of acute and sub-acute rheumatism, with the following general indications: The fever runs high; the pulse is remarkably quick and hard, the perspiration very copious and having a musty smell, the thirst is exceedingly tormenting. The local swelling is not very great, but painful, intensely red, giving rise to the apprehension of pus forming in the joint; it is not apt to shift about; even if other joints are affected, yet the original joint remains swollen and painful; the breath is foul, the tongue has a thick, yellow coating, the appetite is gone, every kind of food causes nausea. The pains are worse every night, towards midnight, aggravated by severe cold and ameliorated by external warmth. The more frequently relapses set in, the more specially is *Mercurius* indicated. In muscular rheumatism, *Mercurius* is indicated by the following circumstances: the pains exacerbate at night, they are deep-seated as if the bone were attacked with great sensitiveness to gentle as well as firm pressure.

*RHUS TOXICODENDRON* is adapted to every form of rheumatism, except arthritic. In acute articular rheumatism, it is indicated by the following symptoms: Violent fever, with tendency to the adynamic type; delirium and excessive restlessness; the swelling is inconsiderable, admits of some motion, is intensely red and somewhat sensitive to contact. The perspiration is not considerable. The patients are constantly changing their position, for even after lying for a short time in the same position, the pains are very much increased. Feather beds are intolerable, so is external artificial warmth. For muscular rheumatism, *Rhus tox.* is the best remedy, if the attack is caused by exposure to wet; if the above mentioned circumstances either improve or aggravate the symptoms; if the pains at once become associated with paralysis and contraction; if the muscles of the lower extremities are the seat of the disease. Rheumatic paralysis particularly points to *Rhus*. In chronic articular rheumatism, *Rhus* is of little, if any use.

*PULSATILLA* is indicated in mild, sub-acute rheumatism of the joints and muscles; the affection shifts about frequently and speedily; the pain exacerbates in the evening and at night; they are violent, tearing, drawing and jerking pains, increased by warmth, improved by cold, at least for a short time.

*Pulsatilla* is seldom appropriate in chronic rheumatism, but more so in the rheumatism of muscles and of the joints.

*TARTARUS EMETICUS* deserves to be used more than it so far has been—it is one of those remedies that have a good effect in exceedingly painful local muscular rheumatism, for instance, rheumatism of the muscles of the back contracted after a cold during the performance of a fatiguing muscular effort. In such a case, Tartar emetic very soon brings relief. In acute articular rheumatism, Tartar emetic is indicated by the following symptoms: Marked swelling of a number of joints, the pains are not very great during rest, but this rest is frequently interrupted by spontaneous, spasmodic, very painful contractions of single bundles of muscles. There is not much fever; the symptoms of digestive derangement, on the contrary, are very prominent. A condition marked by such symptoms, sometimes occurs during the subsequent course of articular rheumatism, scarcely ever at the commencement.

*DIGITALIS PURPUREA* is, in our opinion, a most important remedy in acute articular rheumatism; in the last few years we have often seen this remedy produce a striking effect and shorten the course of the disease. Hurried, small pulse easily affected by motion; increased strength of the beating of the heart, but the sounds are muffled and indistinct, mingled with arterial murmurs; hurried respiration, with ability to draw a long breath; hurried, abrupt speech; almost complete suspension of the urinary secretion; shining-white swelling of the joints, not very sensitive to pressure; a number of joints are attacked at once; the whole body is very pale. During the whole course of the disease we have given this medicine without any other drug, and in spite of the violence of the symptoms, we have never been able to discover any but the best results.

In conclusion, we desire to state that *Digitalis* holds a high rank as a



remedy for rheumatism among the rational physicians; there is, undoubtedly a reason for this.

SULPHUR bears almost a specific relation to the rheumatic process. In an acute attack we would not think of giving Sulphur; on the other hand, Sulphur is indispensable to remove the remaining traces of acute rheumatism, upon which the extraordinary disposition to relapses generally depends. What this remedy is capable of accomplishing in chronic rheumatism, is shown by the numerous cures which are every year wrought by the use of Sulphur-springs, and which it is impossible to doubt.

Sulphur exerts a curative power over arthritic rheumatism; it arrests the progress of the disease, and materially reduces the swelling of the joints, but must be given in large doses.

Although Sulphur-springs are the most effectual remedy for constitutional rheumatism, yet there are other means calculated either to heal or prevent new attacks; some of these means are often sufficient to perform a cure. In this class we rank the cold-water treatment, sea-bathing, the Turkish and Russian baths. The two last-mentioned have to be employed with great care; if they help at all, the favorable effect is seen after a few baths.

It is a matter of course that the cause should be removed as much as may be.

The diet in acute rheumatism is easily managed; the patients either do not crave any nourishment, or their appetite is very much impaired. Fat and greasy articles of diet are decidedly injurious; acid substances, especially stewed fruit, have a very good effect; raw fruit may be partaken of, but moderately.

## CHLOROSIS OR GREEN-SICKNESS.

### EMANSIO MENSUM.

#### *Cases in which the Menses have never appeared.*

Chlorosis is a disease which occurs exclusively among females, chiefly between the ages of thirteen and twenty-four, seldom at a later period; if it does, it can be traced to secondary disturbances such as: confinements of young women, coming rapidly one after another, more especially if the women nurse their own children.

The disease sometimes breaks out previous to the first appearance of the menses, more frequently after several menstrual periods; as an entirely primary disease, it only breaks out among unmarried women. It is, in some degree, hereditary; females of a pale complexion are more liable to be attacked with it; though no constitution is exempt from the disease, although delicate individuals with irritable nerves are more susceptible to it. Among other causes, we may mention: Insufficient exercise, mental exertions without corresponding muscular activity; excitement of the fancy, especially when caused by novel-reading; excitement of the sexual instinct by onanism, improper converse with the

other sex; deprivation of the open air, and interference with the free expansion of the chest by tight dresses. Chlorosis is very commonly met with among daughters of a tuberculous mother.

**SYMPTOMS AND COURSE.**—This disease generally comes on very slowly—the patients become more irritable; they are apt to get tired after every little effort; they are liable to changes of color; the skin soon loses its bright lustre, and the patient complains of feeling chilly at an early period of the disease. Inasmuch as the disease may be characterized by a variety of symptoms, we will describe the derangements as they appear in each special organ and system.

The skin at times has the color of wax; at other times it is rather yellowish, or of a dingy white, the veins being either not at all perceptible, or but indistinctly so. The color of the cheeks may change quite often within a very brief period of time. The visible mucous membranes are more or less without color. Swelling of the feet and limbs sometimes occur, but only in the highest grades of the disease.

The following symptoms occur in the digestive range: Impaired appetite, aversion to meat, longing for strange articles of diet, such as vinegar, chalk, coffee, beans; bloating of the stomach after every meal; sourness of the stomach, and generally the bowels are very torpid.

In the nervous system we discover excessive irritability, neuralgia, hysteric symptoms, fitful mood. The breathing is accelerated; the least physical exertion causes dyspnoea (shortness of breath) sometimes to a very high degree. The circulation is accelerated, very seldom retarded; disposition to palpitations of the heart, which are easily excited by a physical effort. The menses are irregular, sometimes entirely suppressed or very tardy, sometimes more profuse than usual, but always of a lighter color, or even quite colorless.

Accompanying these symptoms are pains of the most diversified kind, very generally uterine catarrh. The urine has a strikingly pale color. The patients generally sleep very soundly, and have to sleep a long time, though sleep never refreshes them.

One or the other of these derangements is generally wanting. The one characteristic symptom is never absent: dyspnoea and palpitation of the heart from the least unusual effort, especially after going up stairs.

The course of chlorosis is always more or less protracted, sometimes very chronic. If no particular disturbances take place, the affection can sometimes be cured in a few weeks; whereas, if the mode of living which had acted as the exciting cause is persevered in, the trouble may continue for years. The disease is most commonly more violent in summer than in the winter season. Uncomplicated chlorosis always terminates in recovery.

Among the complications, the simultaneous presence of tuberculosis and scrofulosis is most threatening. We generally find that scrofulous girls who are attacked with chlorosis recover their health to some extent for a year or two, after which they die of consumption, or phthisis may set in as a direct development of a protracted chlorosis.

## HOMŒOPATHIC TREATMENT.

The leading remedies which have been found most useful in this affection are Pulsatilla, Sepia, Bryonia, Sulphur, Calcarea carb., Ferrum, Lycopodium, and Plumbum.

**PULSATILLA** is peculiarly useful in chlorosis, when the derangement seems to have been excited by, or is connected with, indigestion; and it is accompanied with headache, particularly in the side of the head with shooting pains extending to the head and teeth, *sometimes shifting suddenly to the other side; sallow complexion; difficulty of breathing, and sense of suffocation after the slightest movement; palpitation of the heart; coldness of the hands and feet* often changing to sudden heat; disposition to *diarrhœa and leucorrhœa*; pains in the loins; sensation of weight in the abdomen; almost constant chilliness and shivering; spasms in the stomach with nausea, inclination to vomit and vomiting; hunger with repugnance to food; swelling of the feet and ankles, great fatigue, especially in the legs. This medicine is particularly adapted to females of mild disposition, disposed to be sad and tearful.

*Dose:* Six pills every evening.

**SEPIA** is a remedy of *very* great value in this disease when there is a good deal of headache, *sallow* complexion with *dark colored* spots; frequent colic and pain as if arising from bruises in the limbs with a drawing, tearing pain in the thick muscles of the back part of the legs. It may follow Pulsatilla with great advantage or be given in alternation with that remedy.

*Dose:* Six pills or a powder every morning.

**BRYONIA**.—Frequent congestion of the head and chest, *bleeding at the nose*; dry cough; coldness and frequent shivering, sometimes alternating with dry and burning heat; constipation or colic, bitter taste in the mouth, tongue coated yellow; sense of pressure in the stomach, as if from a stone.

**SULPHUR** is more particularly indicated when there is pressive and tensive pain in the back of the head extending to the nape of the neck; humming in the head; pimples on the forehead and round the mouth; pale and sickly complexion, with red spots on the cheeks; changeable appetite with general emaciation; heaviness in the stomach under the lower ribs and in the abdomen; bowels irregular; great tendency to take cold; irritability and inclination to be angry; redness and melancholy with frequent weeping.

*Dose:* Six pills every other day.

**CALCAREA CARB.**—Is often of the most striking benefit in chlorosis. Sometimes a complete cure is effected by it alone, even in the worst cases with (œdema) swelling of the extremities and extreme dyspnœa. When there is complication with tubercular diathesis accompanied by cough, Sulphur and Calcarea Carb., often prove highly beneficial in alternation, or if oppressive headache is complained of, Sepia may be given in alternation. Sometimes menstruation does not take place for some time afterwards, though the general health is very much improved under the employment of the remedies prescribed.

*Dose:* Six pills every morning.

## CONSUMPTION.

## PHTHISIS PULMONALIS.

One of the earliest symptoms of consumption is a short cough, which is either dry or accompanied by the expectoration of a frothy mucus, and is generally slight at the commencement, but more or less constant. Shortness of breath, is another early symptom of consumption. It is, at first experienced only during exertion, but subsequently comes on after every fit of coughing, or on lying on the one or the other side, and is much increased by the slightest movement. Symptoms of gastric derangement, are frequently present, with redness of the tongue, or white furred center, with inflamed and projecting points, and vivid red tip and margins; the patient falls off in flesh, becomes indolent, dejected, and overpowered with languor. A feeling of soreness is often complained of behind the sternum or under the collar bones, particularly after any fatigue, or after a fit of coughing, and sometimes on exposure to cold air. The pulse is often normal in the first stage of the disease, but soon becomes full, hard, and accelerated. Fever of an intermittent character soon makes its appearance; it declares itself most towards night, remits from about two in the morning until the following day at noon, when it returns in a slighter degree, and continues until about five in the afternoon, and is then followed by another remission. This hectic fever is, in the first instance, chiefly manifested by flushing of the face (which is often most apparent after a meal), and heat in the palms of the hands and soles of the feet; but as the disease advances, night sweats supervene, which leave the patient in a state of great exhaustion in the morning. As the expectoration increases it becomes more viscid and opaque, and is often tinged with blood, or a considerable quantity of florid, frothy blood is ejected in consequence of the obstruction offered to the blood-vessels, by the indurations or granulations of the lungs. As the disease advances and passes into the second stage, or that in which the dark red or grayish indurations are converted into crude yellow tubercles, the respiration becomes more difficult, the emaciation and debility go on increasing, the cough is rendered more severe and troublesome, particularly at night, and the fever, though of shorter duration, is attended with more profuse sweating, and the pulse loses tone. The expectoration becomes, at the same time, more free and copious, particularly towards morning, and is less thin and transparent.

During the fever, or after meals, or at times of excitement, a circumscribed red patch still appears on each cheek, but at other times the color of the cheek is faded, and the countenance wears a dejected expression.

In the third (or suppurative or ulcerative) stage of the disorder the tubercles become soft, and are expectorated at first in the form of curd or cheese-like particles, and subsequently mixed up with pus, mucus, shreds of lymph, blood, and occasionally, though rarely, portions of the lung. The bowels, from having been more inclined to be costive at the commencement of the disease, are now more prone to be relaxed, so that attacks of diarrhœa often recur frequently, and, by alternating with sweats, induce an excessive degree of weakness and prostration. In this, the last stage of the disease, the patient becomes reduced to a skeleton; the face is thinned, the cheek-bones prominent, the eyes look hollow, the hair falls off, the



nails are livid and incurvated, and the feet swollen; but notwithstanding all this, the countenance presents a degree of clearness, and the eyes a lustre that are rarely, if ever, met with in other maladies, moreover, the state of mind is generally so serene and hopeful, that the patient seems often quite unconscious of his dangerous condition, and speaks and acts as if in full anticipation of a speedy recovery. The senses commonly remain entire and collected to the end of the disorder, but in some cases delirium precedes death and continues until life is extinct. The usual duration of phthisis pulmonalis is from eight to nine months to a year and a half; but circumstances tend much to vary the length of the disease; and there is a rapidly fatal form which runs its course in from two to three months, sometimes indeed in only one. When the malady makes slow progress, the patient is affected with cough, weakness, and emaciation chiefly in winter and spring, and in many respects restored to comparative health in summer; but is always extremely susceptible to cold, and commonly complains of breathlessness on the slightest exertion. In this state the patient continues for a considerable time, sometimes even for several years, until at length the symptoms of confirmed consumption are developed by the invasion of an inflammatory attack proceeding from cold or some other irritating cause.

**THERAPEUTICS.**—It would require a separate treatise to do justice to the treatment of this deplorable disease, by giving or attempting to give a full and minute description of the characteristic indications for the medicines which are appropriate to the various forms of the different stages of this disorder. We must, therefore, content ourselves here, by presenting our readers with a brief notice of the principal remedies which are employed in homœopathic practice against the inflammatory, suppurative, and ulcerative stage of tubercular consumption.

### HOMŒOPATHIC TREATMENT.

In the *first* stage of the malady, when the tubercles are in a crude, unsoftened state, or when they are inflamed and commencing to soften, the remedies by means of which the malady may be retarded, if not arrested, and, with due collateral precautions, kept harmless for years, are chiefly Aconitum, Bryonia, Belladonna, Lachesis, Hepar, Spongia, Phosphorus, Dulcamara, Pulsatilla, Arsenicum, Nux-v., Hyoscyamus, Silicea, Calcarea c., Carbo v., Acidum nitricum, and Sulphur. These must be selected according to the aggravate symptoms of the case under treatment. Their leading indications may be gleaned from the chapters on "Cough," "Pleuritis," "Pneumonia," "Hemoptysis," and "Repertory."

In the *second* stage, with more free, copious, and somewhat purulent expectoration, the most important remedies are: Acidum nitricum, Silicea, Kali-c., Sulphur, Calcarea, Natrum-m., Mercurius, Lachesis, Phosphorus, Lycopodium, Carbo.-v., Sambucus, Hepar sulphuris, Spongia, Cinchona, Ferrum, Conium, Zincum, Ammon.-c., Laurocerasus, Graphites, Nitrum, Iodium, Drosera, Plumbum, etc.

In the *third*, or ulcerative stage, the same remedies as the foregoing, together with Guaiacum, Sepia, Stannum, Staphysagria, Acidum phosphoricum, Sanguinaria canadensis, are those by means of which the symp-

toms may be materially mitigated, and the fatal issue of the disease postponed. A few general indications for most of these will be found in the chapter on "Cough." When the colliquative sweats are particularly distressing, Sambucus, Stannum, Cinchona, Phosphorus, Arsenicum, Carbo v. et a., Silicea, Mercurius, Nitrum, Lachesis, Sulphur, and Lycopodium are the medicines which are of the greatest service. The remaining morbid symptoms must regulate their selection. When colliquative diarrhœa predominates: China, Ferrum, Arsenicum, Phosphorus, Acid. phosphoricum, and Sepia, are the most useful. (See "Diarrhœa.")

While conducting the treatment of consumption, the state of the digestive functions, and in females the condition of the uterine system, likewise, must be strictly attended to. This is, however, a superfluous precaution to the homœopathic practitioner, as he is ever careful to pay due regard to every symptom, not only in this, but in every other disease.

Should none of the remedies, above quoted, correspond to the derangements alluded to in particular cases, although they may be otherwise indicated, an intercurrent remedy may be selected from amongst those we have mentioned in the articles on "Dyspepsia," "Chlorosis," etc. The temperament and constitution of the patient ought also to claim attention in the selection of the remedies.

In conclusion, it must be remarked that as the irritation which is so repeatedly created in the lungs by the vicissitudes of climate, so constantly occurring in most parts of this country, forms a great drawback to the more or less successful treatment of pulmonary consumption, it is of great moment that every possible means be taken to avoid that pernicious influence. It has been much in vogue with many medical men to recommend warm climates, or well-sheltered situations, even, although the atmosphere might be of humid and relaxing nature. But we confess that we are inclined to side with those who do not object to a somewhat bracing and cold atmosphere, provided it be dry and not of variable temperature.

Much, however, depends upon the peculiarity of the case,—the air, as well as the food, which may be adapted to one patient, being often perfectly inappropriate, and, therefore, injurious to another.

## Part Thirteenth.

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### DISEASES PECULIAR TO WOMEN.

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## CHAPTER XXXI.

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### PREGNANCY.

#### CONDENSED SIGNS OF PREGNANCY.

The determination of pregnancy, at the earliest possible period, forms a most difficult problem, on account of the same symptoms having been known to exist through the influences of other derangements.

*Suspension of the menses* is generally the first indication which leads the woman, in whom impregnation has been possible, to consider herself *enciente*. But the importance of this symptom will very greatly depend upon the attendant circumstances: if the woman has been very regular, and if the cessation of the menses promptly occur after some particular sexual intercourse, the presumption of pregnancy will be very strong indeed. But if she has always been very irregular, the mere fact of the menses failing to make their appearance at a particular monthly period, will carry with it but little weight. Where the entire absence of the menses for two or three months occurs, from no other assignable cause, and where this suspension is attended with good health and appetite, and some perceptible *increase* in the size, or, on the other hand, perceptible *sinking* away of the abdomen, the conclusion of pregnancy may be considered to be well founded.

*Changes in the breasts* very frequently occur; they sometimes feel heavy, are inclined to itch, and the areola around the nipple becomes dark-colored, and sometimes present an oily appearance. And yet even these circumstances are far from affording unmistakeable evidences of pregnancy, since they have been known to arise in this combination from other causes.

Another symptom which may and does often occur in the early months of pregnancy, is an *itching* and *irritation* of the *sexual parts*; though in newly-married women the menses are sometimes suspended from irritation of the sexual organs when no conception has taken place, and at the same time there may be an increase in the size of the abdomen and in the sensibility of the breasts; so that even this very strong combination of symptoms cannot be relied upon.

*Morning sickness* forms, in very many women, the next sign of pregnancy. As its name indicates, it is a morbid symptom, but on that account none the less valuable as a diagnostic sign. It arises from sympathy of the coeliac or solar plexus with the organic nervous system of the

uterus. This morbid irritability may commence immediately after conception, but it generally sets in about the fifth or sixth week after conception, and ceases soon after the third month. It may become, in individuals, a positive indication of their being pregnant, since these persons learn by experience that these symptoms occur with certainty and regularity at a particular time after conception. Thus, in different persons, the presence or absence of morning sickness will have a very different diagnostic value. Still, where morning sickness makes its appearance persistently attended with suppression of the menses, and in circumstances where there is a liability to impregnation, it can scarcely be attributed to any other more probable cause than pregnancy, and this indication will be strengthened by the character of the sickness itself. The appetite improves and is good through the day, in spite of the nausea, vomiting of a peculiar watery fluid, and sinking at the pit of the stomach, which occur and continue for a short time, only on first rising in the morning. The sickness and the fluids vomited up are different from those accompanying any other disorder, such as gastric or bilious fevers, for example. While morning sickness, from its peculiar character, brief daily appearance, usual temporary continuance and final sudden and perhaps unexpected disappearance, becomes, where it occurs, a valuable indication of pregnancy, its absence is hardly to be regarded as an opposite sign, as disturbances of the uterus, apart from pregnancy, may occasion it, and it sometimes follows suppression of the monthly flow from other causes than conception.

Certain other *derangements* of the *digestive organs*, such as eructations, heartburn, remarkable longings for some particular article of food or other substance not used as food; and, on the other hand, aversion to some one or more of the common varieties of food, which may occur separately or in connection with morning sickness, or even subsequently to it.

The same may be said of *salivation*, which occurs, in some women, about the fourth or sixth week; in such cases, the frequent spitting will be equally diagnostic, whether the quantity be large or small. This salivation, differing from that which is produced by mercury by the absence of foul breath, sore gums and great prostration; it becomes characteristic of pregnancy, just as the morning sickness, above described, does, by reason of its being a sympathetic affection.

#### OBSERVATIONS ON PREGNANCY.

This period may be regarded as one of the most interesting eras of a woman's life. She is now no longer acting for herself alone but becomes invested with a new and serious responsibility, and upon some of the most apparently trifling of her actions may depend the future health and happiness of a being bound to her by the fondest ties.

From the mass of evidence collected by careful observers of the operations of Nature, we are warranted in drawing the conclusion that the actions of the mother exercise a great influence over, not only the constitutional and physical, but also the mental organization of her offspring. Keeping this fact in view, we shall endeavor to point out the course that mothers, who prefer the welfare of their future offspring to their own in-



dulgence, should pursue, and from which they will derive a double benefit, an improvement in their own health with exemption from suffering and the delight of seeing their children pass safely through the anxious period of infancy.

The leading causes of a weak and sickly child are ill-health or constitutional taint of both or either of the parents; very early or late marriages; great inequality between the ages of the parents; errors in dress, diet, and general habits of life, and lastly, powerful mental emotions.

Females should seldom, at least in this country, enter into the marriage bond before their twenty-first or twenty-second year; prior to that period their organization is scarcely ever fully developed; those who marry at sixteen or eighteen years of age incur the risk of a severe after suffering themselves, and also of giving birth to weak and delicate children. How very often we see the first children of such marriages perish in infancy, or after contending through a childhood of continued delicacy sink into a premature grave. Women who marry late in life incur considerable personal risk and severe suffering in giving birth to children, and the offspring is seldom healthy. The children of old men, although by a young wife, are very often extremely delicate and susceptible to illness; they do not unfrequently precede their father to the grave or linger but to drag on a miserable and wearisome existence.

In concluding these observations we may remark, that so far is the period of pregnancy from being destined for one of suffering or danger, that nature has taken every precaution for the protection of the female and her future offspring. While pregnancy runs its equable and uniform course the expectant mother enjoys an almost complete exemption from the power of epidemic or infectious diseases, and even chronic complaints are frequently suspended; in fact with the exception of some slight morning sickness and occasional trifling uneasiness, a well-constituted organism should enjoy as good health during pregnancy as at any other time; and many women pass through this period and give birth to vigorous children without even the most trifling inconvenience.

Though, as we have said, nature seems during this period to adopt every possible precaution for health and preservation of the parent and her future offspring, yet are her wise arrangements too often rendered void by direct violence of her laws. The expectant mother should therefore bear in mind that the duty of leading a regular and systematic course so essential to every individual devolves upon her with double force, since every neglect or breach of these ordinances of nature upon her part is frequently visited with fearful energy upon her yet unborn infant.

#### HYGIENE OF PREGNANCY.

A few words on this subject, which is quite as important as the medical treatment of the disorders of pregnancy, inasmuch as it is intended to prevent such disorders from occurring.

In order that this period may be passed with as much comfort and its end accomplished as easily and safely as possible, all irregular and, I might say, intemperate habits, should be laid aside, and all pernicious

practices abandoned. The pregnant woman *should strive to cultivate for herself the utmost cheerfulness and tranquillity of mind*; she should strive to be at peace with all the world, and at peace with herself, for her mental and moral state will surely be engrafted upon her offspring, *the education of the future being commenced while yet in utero*. And in this effort she should be seconded by her husband, whose responsibility is very great at this period—whose conduct toward the wife of his bosom, at this period, acting upon her mental organization will be transmitted to their joint-offspring for weal or for woe.

A pregnant woman, during the whole course of her pregnancy, will require more sleep than at other periods, and an ample allowance of the same should always be indulged in. And yet, at the same time, habits of slothfulness should be avoided. "Early to bed, and early to rise," applies with additional force at this juncture, and nine, or, at the latest, ten o'clock at night, should find her in bed, and six, or, at the latest, seven o'clock in the morning, should find her up. Habits of regularity, in all things, should be cultivated—regularity as to hours for sleeping and waking—and regularity as to meals, exercise, stool, etc.

#### AIR AND EXERCISE.

Nothing tends more to the preservation of health than a proper attention to these two important points, and yet, unfortunately, there are, perhaps, few more completely lost sight of. During this epoch, carriage riding, alone, is not sufficient; walking brings, not only the physical, but the whole of the organic muscles, into play, and communicates the increasing vigor of the mother to her offspring; therefore, walking is indispensable, and every day should find the expectant mother taking a walk, leisurely, and with the mind at ease; and this rule should be observed, even in cold and unpleasant weather, excepting when the walking is rendered dangerous from snow and ice. A walk is often an excellent remedy for the feeling of drowsiness and heaviness which often creeps over a woman in this condition—a much better remedy than taking a nap or a prescription from the doctor.

Some women take a great deal of exercise, yet without corresponding benefit, from their work occupying them wholly indoors, showing the inutility of exercise in itself, unless combined with pure air. Others, again, injure their health, and frequently induce miscarriage, through their excessive levity and thoughtlessness, by unrestrained indulgence in active exercise, riding on horseback, dancing, etc. A woman ought to recollect that, if through her own folly, she has brought on miscarriage, the greatest possible care should be taken to prevent its recurrence; that a second attack increases her liability in future; and that she who has suffered twice or thrice from this misfortune, even when she escapes it, rarely attains her full time. Moreover, continued casualties of this nature *frequently terminate in premature death*.

#### EMPLOYMENT OF THE MIND, ETC.

Useful employment, reading, or useful and agreeable conversation, should engage the waking hours not otherwise employed. In fact, I should like to impress upon the *interested* portion of my readers the im-

portance of cultivating a proper condition of mental vitality, as well as physical. How important it is that the expecting mother, as a new thread of life is being spun within her, should *think* and *do* that alone which is good and right, for of a certainty her offspring will have woven into the tissues of its existence the resultant of what she *is* and *does* during her pregnancy.

Experience has presented us with many instances in which the predominant feeling in the mind of the mother, during pregnancy, has influence on the future mental organization of the child. The effect of any unpleasant or unsightly object upon the imagination of the mother, and the transmission of that effect to the offspring, evidenced in various mental or physical peculiarities, after birth, is a theory as old as tradition.

#### CLOTHING DURING PREGNANCY.

The dress of the female should of course be suited to the season, and if she pass from a warm into a cold atmosphere, she ought to keep herself well protected to prevent the risk of taking cold. But a point of far greater importance is the adaptation of the clothing to the form, so as to preclude all unnecessary pressure upon any part of the body, that might interfere with the functions of those important organs which are destined for the birth and nourishment of the infant; tight lacing (at all times most objectionable) is particularly injurious during this period, inasmuch as it interferes with the natural action of the body, and bearing directly upon the abdominal muscles, the blood-vessels, lymphatics, and the bowels, produces narrowness of the chest, disturbs the circulation, and causes derangements of the liver, and exercises a most distressing effect upon the breasts and uterus. Females, in their efforts to preserve the elegance of their form during pregnancy, are little aware that the constricting efforts thus exercised upon the abdominal muscles destroys their elasticity, prevents a proper retraction after parturition, and thus proves one of the most common causes of abdominal deformity. Moreover, to the vanity of their mothers in this and other respects, many, it is probable, owe their clubfeet and other malformations; and in addition to these evils this practice not unfrequently deranges the position of the fœtus—a displacement which, together with the consequent want of energy in the muscles and the parts concerned, generally brings on protracted and dangerous labors. Besides this continual pressure on the uterus is liable to bring on premature labors. To tight lacing may be attributed the difficulty which so many mothers of the present day experience in suckling their infant, by the unnatural pressure deranging the process required for the subsequent secretion of milk; from this also arises sometimes those dangerous indurations, cancers and other affections of the breasts and also retraction of the nipple, from which the act of suckling is rendered difficult and in some instances impossible.

Care also should be taken not to wear anything tight about the limbs, such as wrist-bands or garters, even elastic garters spanning the leg may be injurious, as they impede circulation and encourage the development of varicose veins, to which the system is already predisposed and which in many instances, become very painful and troublesome. One fact in

connection with this question of dress is here noteworthy, viz: that women in the latter months of pregnancy complain of, and really suffer from *coldness of the abdomen*, the protruding abdomen causing the clothing to set off to the extent of almost completely exposing that part of the body to direct contact with the air. In view of this, the clothing should be so adjusted, or an extra garment worn to obviate the difficulty. Notice of these matters are greatly beneficial, and are so apt to be considered of minor or insignificant importance.

#### DIET.

The diet during pregnancy should be generous in meats, vegetables, and fruits, and at the same time plain. Excessive coffee and tea drinking should be laid aside. Sugar, salt, and spices should be taken in moderation; stimulants of all kinds, especially such as wines, liquors, beer, etc., should be most strictly avoided. If, however, the female has been long habituated to wine it may be taken in extreme moderation and diluted with water.

#### GASTRIC DERANGEMENTS DURING PREGNANCY.

NAUSEA AND VOMITING—MORNING SICKNESS.—In many women, nausea and vomiting set in at an early period of pregnancy, and are simply the result of a peculiar reflex irritation of the stomach; in these cases this affection usually continues but a short time. Next to the cessation of the catamenia, and especially in conjunction with it, morning sickness becomes one of the earliest, as well as one of the most reliable, original signs of pregnancy; while for all those who have ever before experienced it, there is little room for mistake in regard to its nature; for in each individual in whom it occurs it has a uniform type and well remembered character.

The nausea may occur, at an early period, in the morning, with unvarying regularity; or<sup>r</sup> in the evening, or at any period of the day, or even of the night. For each individual it maintains, also, its uniformity as to the date of its first appearance; in some it appears very soon after conception; in others it begins toward the third or fourth month, and in others again it comes on only toward the close of gestation; in these latter cases, it might have appeared, also, for a short time, after conception. In the duration there is, also, the same general variety and individual uniformity. Thus, in some women, it lasts but a few weeks—from six to eight at most; in others it continues for four or five months; while in some few most distressingly severe cases, this difficulty persists through the whole period of utero-gestation, unless relieved by art.

The nausea and vomiting of pregnancy, as already stated, are *most* apt to occur on first rising in the *morning*; sometimes these symptoms disappear in a few minutes, sometimes they last through the greater portion of the day. In some, the vomiting is very easy; in others it is attended with very severe retching, and even with other painful symptoms.

Those who vomit upon waking or rising in the morning, usually throw up some viscid, glairy matters, which are generally colored with a little bile, especially if the retching has been very severe. Others vomit



only after eating, occasionally after only one of the daily meals, but some times after all of them. Again, in some unfortunate cases, the vomitings continue, even in the intervals of the repeats, everything taken into the stomach, whether liquid or solid, being immediately rejected. There are cases, finally, in which the mere thought of food, or the sight or smell of it, is sufficient to induce the vomiting.

In some cases, nearly all of the food taken seems to have been thrown up, even for months in succession, and yet a good delivery succeeds at full term; the repeated and severe vomitings seeming to exert comparatively little influence upon the general health. In like manner, pregnant women may rise from the breakfast table, vomit, and return to their food as if nothing had happened. Such characteristics so different from vomiting, arising from any other cause, almost conclusively indicate the presence of pregnancy.

The diet and regimen of the pregnant woman should be carefully attended to; such articles as best agree should be partaken in each case, and equal care taken to avoid every unwholesome or irritating influence. It has sometimes been found that the excessive irritability of the stomach, in pregnancy, is due to the presence of fumes from some neighboring manufactory which, although insufficient to induce any unpleasant symptoms in the ordinary condition of the woman, very powerfully affect her when pregnant.

#### HOMOEOPATHIC TREATMENT.

The following remedies will be found to cover the principal forms of gastric derangements of pregnancy. For particular indications, see "Heartburn."

**ANTIMONIUM CRUD.**—Nausea and vomiting or only nausea with white-coated tongue. Watery stools with occasional hard lumps; frightful vomiting with convulsions; belching with taste of what has been eaten; painful sense of fullness of the stomach, which is sore on pressure.

*Dose:* Six pills night and morning.

**ARSENICUM.**—Very great debility and exhaustion; the least effort causes exhaustion. *Very pale, white look.* Bitterness in the mouth, particularly after eating or drinking. Cold water seems to lie in the stomach until it gets warm, after which she vomits it, therefore she cannot drink it although she desires it. Feels cold and wants to be in a warm room or to be covered up warmly; very uneasy and restless; vomiting of blackish or greenish matter.

*Dose:* As for Anti. Crud.

**BRYONIA.**—Nausea on waking in the morning. Nausea is usually relieved by keeping quiet; dry parched lips, dry mouth and tongue; head aches as if it would split; stool of hard, dry feces as if burnt. All the symptoms worse from motion, better when still.

*Dose:* As for Anti. Crud.

**CALCAREA CARB.**—She cannot sleep after three in the morning; heartburn and food eructations; soreness of the tongue either on the tip or sides, so that she can scarcely eat or talk. Sensation as if the feet

were cold or damp. Feels better from warmth, and cannot bear cold air. Vomiting of sour matter.

*Dose:* As for Anti. Crud.

CONIUM.—Vertigo, particularly on turning over in bed. Where the history of the case of vomiting reveals the fact of swelling and soreness of the breasts with each menstrual period, and the patient always feels worse after going to bed, so much so, that she is obliged to sit up or walk about to get relief. The urine intermits at every flow.

*Dose:* Six pills three times each day.

IPECAC.—One continual sense of nausea all the time—not a moment's relief. Vomiting of large quantities of mucus. Diarrhœa and colic. Disgust for food; empty retching; vomiting of food, slime, or blood; sour vomiting; cutting pains about the umbilicus.

*Dose.* As for Conium.

NUX VOM.—Nausea and vomiting every morning with constipation; large difficult feces. Food and drinks have a fetid smell to her. Not much appetite, or canine hunger; aversion to water and bread. Longing for brandy, beer, etc. Bitter or sour taste. Vomiting of food, of bile, of black or sour matter.

*Dose:* As for Conium.

PULSATILLA.—Pulsations in the pit of the stomach. Vomiting of mucus. Bad taste in the mouth every morning on waking; she has to wash it out, soon it is so bad she cannot bear it. Nothing tastes good to her. Absence of thirst; she does not relish as much water as usual. Nightly diarrhœa; stools very changeable. Loss of taste or bitter, fatty, saltish, sour, or sweetish taste.

*Dose:* As for Conium.

SEPIA.—Vomiting of milky water or milky mucus. Sense of emptiness at the pit of the stomach; the thought of food sickens her; a sense of weight in the anus. Eructations tasting like spoiled eggs. Taste as of manure. Aversion to meat. In the morning nausea as if all the viscera were turning inside out. Taste bitter or saltish. Disgust for all kinds of food. Constipation.

*Dose:* Six pills night and morning.

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## HEARTBURN.

### ACIDITY. WATERBRASH.

These distressing forms of gastric disturbance sometimes make their appearance soon after conception, while in other cases they may not make their appearance until after the fourth month. Some women are remarkably subject to these symptoms when *pregnant*; in others they are manifested with less violence; in others not at all. There may be merely a burning sensation—heartburn in the throat—which indicates sympathetic irritation; or the severer forms of waterbrash with acidity which arise from more fully developed gastroses. As in the nausea and vomit-

ing of pregnancy, so in waterbrash, acidity, and heartburn, every degree of intensity and variety of manifestation and complication may be seen in different individual cases. Sometimes these disturbances are found accompanied with, and greatly aggravating the nausea and vomiting, while at other times they seem to appear instead of the vomiting.

As in the cases of ordinary dyspepsia these sufferings are worse after certain articles of food or drink, such as meats, fat meats or gravies, milk, or fruit. In the more severe cases nearly everything that is eaten becomes but an added fuel to the burning fire. Still a careful avoidance of all those articles which, whether solid or liquid, are found to disagree most, and a careful selection from the remedies given will, as in cases of nausea and vomiting, go very far to remove the most distressing symptoms, and eventually to secure a great improvement in the general health.

#### TREATMENT.

ANTIMONIUM CRUDUM.—Nausea alone or nausea and frightful vomiting with convulsions. Belching with a taste of what has been eaten. Thirst at night. Painful sense of fullness of the stomach, which is sore on pressure.

*Dose:* Eight pills every four hours.

ARSENICUM is very useful when there is very great debility and exhaustion. *Very pale, white look.* Sensation as of a stone in the stomach. Vomiting of fluids as soon as she takes them. Exhausting diarrhœa. Feels cold and wants to be in a warm room. Very uneasy and restless.

*Dose:* Same as for Anti. Crud.

BRYONIA is particularly indicated when there is distressing heartburn, dry, parched lips, splitting headache. Stool of dry, hard feces, as if burnt. All the symptoms aggravated by motion.

*Dose:* Six pills every three hours.

CALCAREA CARB.—Heartburn and food eructations. Sensation as if the feet were *damp or cold.*

*Dose:* As for Ant. Crud.

CONIUM.—Vertigo on turning in bed. Eructations with heartburn. Terrible nausea and vomiting. Where the history of the case reveals the fact of swelling and soreness of the breasts with each menstrual period, and the patient always feels worse after going to bed and has to walk about to get relief.

*Dose:* As for Bry.

SEPIA. The thought of food sickens her. Eructations tasting like bad eggs. Want of appetite. Taste bitter or saltish. Disgust for all kinds of food. Vomiting of food and bile. Constipation.

*Dose:* Six pills every night and morning.

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#### CONSTIPATION OF PREGNANCY.

Constipation is a very common attendant upon pregnancy, so frequent that by some it is deemed almost a natural consequence. But it is much

more apt to occur, and at the same time be more troublesome and obstinate, in pregnant women whose habits of life are confining, and those who are naturally of a more costive habit. When it does not arise from mechanical pressure exerted by the uterus upon the rectum, by which its dimension is lessened, and its action paralyzed, active exercise in the open air (avoiding indigestible food, strong coffee, and other stimulating liquids), is sufficient to remove the complaint, or, at all events, render it less troublesome.

When nature requires further assistance, the following remedies have given the best satisfaction in the numerous cases which I have treated.

#### TREATMENT.

**NUX-v.** In women of sedentary habits, accustomed to the use of much coffee, wine, and rich and highly-seasoned food, generally. Stools large and difficult; colicky pains, or loud rumbling or rolling in the bowels. Constipation in persons who have been in the habit of using purgatives. Rush of blood to the head during stool.

*Dose:* Four pills every evening, dry on the tongue.

**IGNATIA** can be made use of when the same symptoms as given after Nux., with the addition of an empty feeling at the pit of the stomach; sighing and full of grief.

*Dose:* Four pills every morning, dry on the tongue.

**BRYONIA.** The stool is mostly dark, dry and hard, as if burnt, and is evacuated with much difficulty. The lips are parched and cracked. Much thirst. Stinking flatulency. Obstruction of the bowels from hardened stool. Stool too large to be evacuated without pain.

*Dose:* The same as directed for Nux.

**SEPIA.** Sensation of a weight or heavy lump in the anus; this is a very characteristic indication. The stool is very difficult to pass, even with the most terrible and involuntary strainings. Knotty and insufficient stool. Sepia, 200, has given very marked benefits.

*Dose:* A powder each second night.

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#### TOOTHACHE DURING PREGNANCY.

Toothache is a common and very distressing accompaniment of pregnancy, being in fact only a particular form of neuralgia.

If toothache occurs in sound teeth, as is quite frequent, they should *never* be extracted, and only the greatest care should be used in extracting decayed ones, especially if the patient be of a very nervous temperament. The female should, as soon as she is in proper state, put herself under proper treatment, for this is a valuable indication of some constitutional taint lurking in the system, and no remedies can be otherwise than palliative until this tendency is eradicated.

#### TREATMENT.

**ALUMINA** — (Alum) when the *pains* are excited by mastication (chewing of the food), and when they are of a tearing nature, extending to the cheek bone, temple and forehead.



**CALCARIA.** When the toothache is excited or aggravated by cold air, or anything hot or cold, and attended with painful sensation of the gums, and pulsative, gnawing, or throbbing pains which are aggravated by noise.

**SEPIA** is particularly indicated when there is pulsative, shooting, drawing toothache, with pain extending to the ears or to the arms and fingers, excited by compressing the teeth or by cold air, and attended with swelling of the cheek, and enlargement of the glands under the lower jaw.

**MAGNETIA CARBONICA.** Nocturnal pains in the teeth, insupportable when lying down, and compelling the patient to get up and walk; pains generally boring, burning, drawing, tearing, and resembling those of ulceration, attended with swelling of the cheek on the affected side.

*Dose:* These remedies may be given every three hours, six pills at a dose, until relief, and then the time may be lengthened.

The above are the four leading medicines for this peculiar condition, though there are others which may be called for by particular symptoms, of which I will mention a few:

Arsenicum, Belladonna, Chamomilla, Gelseminum, Hyoscyamus, Merc. Sol., Nux-vom., Pulsatilla.

## SWELLING OF THE LOWER LIMBS.

### VARICOSE VEINS.

This is a very common attendant of pregnancy; it often occasions no little inconvenience and is usually confined to the seventh, eighth and ninth months. It is supposed to arise in most instances from mechanical pressure alone, and to be free from constitutional disease. This is true in those cases where it is not accompanied by dropsical affections. Standing and walking serve to aggravate this condition; it becomes worse toward evening, gradually increases as pregnancy advances, and is often combined with a varicose state of veins.

Many females suffer much during pregnancy from distention of veins in the thigh and other parts, which, becoming violent, eventually cause great pain and inconvenience. These varicose veins generally arise from obstructed circulation, caused by the pressure of the uterus upon the blood-vessels. Considerable alleviation is experienced by constant bathing with water or with diluted alcohol or brandy. Also by bandaging from the foot upwards with a gentle and equal pressure, and by preserving a recumbent posture, which is required in severe forms of the complaint, accompanied with considerable swelling of the feet, ankles, etc. In order to afford relief we would recommend the following remedies.

### TREATMENT.

**PULSATILLA** may be given, particularly when there is excessive pain and swelling with a good deal of inflammation, or when the veins are of a livid color which is imparted to the whole limb.

**ARNICA** is of great service when the occupations of the patient render

it impossible for her to lay herself up and avoid much standing and moving about in discharge of her domestic duties.

PULSATILLA and Arnica given in alternation a dose every day will prove very beneficial in such cases.

NUX VOMICA.—When the affection is attended with constipation and piles and irritability of temper.

*Dose:* Six pills every evening.

ARSENICUM.—When the veins are attended with *severe burning* pain with a sensation as if scalding water was running over them.

*Dose:* Eight pills every second evening.

CARBO VEG.—When Arsenicum is not sufficient to subdue the scalding burning sensation.

*Dose:* As for Arsenicum.

BELLADONNA.—Varices with considerable erysipelatous inflammation.

*Dose:* Six pills every four hours.



#### ITCHING OF THE GENITALS.—(PRURITIS.)

Itching of the genitals, which is a frequent attendant upon pregnancy, is caused by congestion of blood to the parts, and may often be relieved by bathing the parts with water in which borax has been dissolved, or with common soda and water.



#### URINARY DIFFICULTIES AND DERANGEMENTS DURING PREGNANCY.

As gestation advances, the increasing size of the uterus causes it to press more and more against the bladder. Thus the capacity of that organ is diminished by the pressure which necessitates a much more frequent discharge of urine. The same frequent micturation results, too, from direct irritation of the neck of the bladder; causing hourly calls to pass water, which are sometimes but partially relieved by the flow of a few drops, only, at a time, or the irritation may amount to dysury, (painful urination), or even to a complete retention of urine.

Where some displacement seems to be the cause, which may sometimes be known by the suddenness of the onset of the difficulty, especially if it follows some accident or over-exertion, the case should receive treatment for the difficulty, different than that which arises from other causes, of which I will mention at the end of this article.

Incontinence of urine sometimes appears, especially in the latter stages of pregnancy. When it appears in the early months, it may result from the pressure of the womb upon the neck of the bladder before it rises out of the pelvic cavity, causing the loss of tone of the part. This difficulty will often yield to the proper remedy, but if not, when it comes on in the early stage of pregnancy, it may be expected to disappear when

quickenings takes place, and the uterus emerges from the cavity of the pelvis.

For the medical treatment of these difficulties, the following remedies should be studied. It is to be noted, likewise, that these remedies should be consulted and may be required for urinary difficulties occurring, not only during pregnancy, but before, during and after parturition as well.

### TREATMENT.

**ACONITE.** Retention of urine, with stitches in the region of the kidneys. Difficult and scanty emission, with pinching around the umbilicus (naval). Bright-red, hot urine. Desire to urinate, accompanied with great distress, fear and anxiety. Worse from exposure to dry, cold air.

*Dose:* Six pills every half hour or hour owing to the severity of the case.

**ARNICA.** After passing a little urine she wishes to pass more, but is unable to do so at that time. Brown urine with brick-red sediment. A bruised and sore feeling exists across the lower part of the abdomen.

*Dose:* Four or six pills every two or three hours.

**CANTHARIS.** Very frequent urination, even sixty times an hour, with violent cutting pain, causing her to scream. The urine is often bloody. The urine does not flow in a stream, but dribbles away, or passes drop by drop, with cutting and burning pains, and tenesmus of the bladder, which is agonizing in severity.

*Dose:* Same as for Aconite.

**CAUSTICUM.** Frequent desire to urinate, a small portion passing away involuntarily. Involuntary passing of urine at night.

*Dose:* As for Arnica.

**CONIUM.** The urine flows and stops, and flows and stops again, and so on. There are cutting pains during the flow, and burning or smarting afterward. Vertigo, particularly on lying down.

*Dose:* As for Arnica.

When the cause can be traced to displacement from accident or over-exertion, Belladonna and Platina have given me the best results. They are to be taken, in alternation, every four hours. Complete rest will be necessary for a few days, in a case of that kind.

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### MISCARRIAGE.

Women who have suffered once from this affection are exceedingly subject to its recurrence and this liability is still further increased after a second or a third attack. When it occurs before or about the third or fourth month it is attended with much less pain or danger although frequent miscarriages, owing to the abundant discharge that is generally present, break down the constitution, and frequently develop severe chronic diseases. When a miscarriage takes place at a later period it assumes

a very serious outlook, and is accompanied with a considerable degree of peril to the patient.

**EXCITING CAUSES**—Are sudden mental emotions, such as fright, grief, or excessive joy, mechanical injuries, or excessive physical exertion, such as lifting too great a weight, reaching up high, going up or down stairs, long walks, riding on horseback or in carriage over rough roads, railway traveling at too great a speed, etc. Other causes are, a luxurious mode of life, fashionable habits, neglecting to take air and exercise, while an unhealthy state of the constitution giving rise to numerous local and general derangements is undoubtedly the *predisposing cause*.

**THE SYMPTOMS** vary so much in particular cases that it is almost impossible to give any particular train of symptoms—though most cases of miscarriage are preceded and attended by the following symptoms: A chilly sensation followed by fever with more or less bearing-down, particularly when occurring late in pregnancy; also *severe pains in the belly; drawing and cutting pains in the groins*; or pains frequently bearing resemblance to those of labor; discharge of viscid mucus and blood sometimes *bright red* frequently mixed with clots; at other times dark and clotted followed by the emission of a thin, colorless fluid. The miscarriage generally takes place during this discharge which occasionally continues, if not properly checked, to flow for hours, therefore placing the sufferer in considerable jeopardy. After the child has been expelled, the flooding and pains generally disappear gradually; but if a portion of the placenta (after-birth) be left within the womb the pains may continue with more or less severity and irregularity, the flooding will frequently become excessive and alarming, and offensive, putrid discharges will take place from the vagina.

When miscarriage is threatened the individual must assume the recumbent posture, and in some cases indeed should be strictly confined to the bed, sleeping with few bedclothes; the apartment should be kept cool and every means should be employed to ensure perfect repose to the mind.

In all cases of miscarriage medical assistance should be summoned as promptly as possible; but as life may be lost in *urgent* cases before a physician can be obtained, the following additional particulars should be observed:—When the misfortune gives evidence of being unavoidable and the hemorrhage is excessive and is not promptly arrested by properly selected medicines, the following directions should be observed. Apply cold to the abdomen in the form of cold cloths or sacks of ice or cloths wrung out of ice water, etc., which will frequently have the desired effect by causing the womb to contract and discharge its contents. As permanent cessation of the flow cannot be expected until this is accomplished, and as it is frequently slow to dilate sufficiently for that purpose, the passage should be plugged to prevent the flow until the womb is sufficiently dilated. A piece of sponge of sufficient size or a plug made of old muslin or linen rags with a string attached of sufficient length to disengage it when necessary (called a tampon) may be used for the purpose and should be cautiously inserted. The tampon should be large enough to entirely fill the passage, so as to obstruct the flow of blood. At the same



time the indicated remedy should be given and frequently upon removing the plugs, the womb will be found dilated and will expel its contents. The tampon, (plug) however, is only to be used in miscarriages occurring before the period of quickening, never afterwards.

Another and perhaps the best and safest plan to adopt for dilating the mouth of the womb is this: The patient should be placed upon the bed in the same position as for labor. The bed should be first protected with oil cloths or india rubber cloth so arranged as to guide a stream of water from the vulva into a pail or tub placed near the bed. Another pail must be provided containing tepid water; with a common syringe, the warm water should be thrown *directly upon the mouth of the womb*. This operation irritates and softens the neck of the uterus so that contractions set in in the course of an hour or two, and thus labor is provoked and takes place in the most natural manner possible, except when it occurs in nature's own way at full term. This operation should be repeated in the course of two hours, if the first experiment should not prove sufficient. *This will fail unless the stream is directed upon the mouth of the womb.* The following are remedies.

#### TO PREVENT AND ERADICATE A TENDENCY TO MISCARRIAGE.

**SABINA** is particularly applicable to women who habitually miscarry about the third month. Feeling of sinking or faintness in the abdomen. Violent forcing or dragging pains extending from the back through to the pubis.

*Dose:* Six pills in a teaspoonful of water, repeated after the lapse of twelve hours, and again after the lapse of twenty-four hours, gradually lengthening the interval for each successive dose, until the period of danger is past;—being careful, however, to watch the effect of each administration to discontinue or lengthen the intervals as the case may require.

**SECALE.** Especially after miscarriage has already occurred more than once, and is generally more suitable to thin, scrawny, exhausted women; passive hemorrhage with little or no pain. Great debility, feeble almost extinct pulse.

*Dose:* Six globules, as directed for Sabina.

**SEPIA.** Painful sensation of emptiness at the pit of the stomach. Sense of weight in the anus like a heavy ball. Yellow saddle across the nose. Pressing in the womb, with oppressed breathing. Very *fetid urine*, depositing a clay-colored sediment which adheres to the vessel with great tenacity.

*Dose:* As directed for Sabin.

**VIBURNUM PRUN.** Spasmodic pains shooting from the abdomen into the legs. Frequent and very early miscarriages, thus causing sterility. This remedy is almost specific for miscarriage, as a preventive.

*Dose:* Six drops of the tincture to be taken every evening, in mild cases, in urgent ones, every morning, noon and evening.

#### THE ACTUAL ATTACK.

**ARNICA.** When the symptoms have been excited by an accident—

such as a fall, blow or concussion, and there is a sore, bruised feeling, this remedy will prove effectual if administered as follows:—

*Dose:* Take six pills every ten, fifteen or twenty minutes (in very urgent cases), and subsequently every half hour, gradually extending the intervals to three hours, and continuing the administration until decided improvement or change.

**RHUS.** If the symptoms have originated in a strain from lifting, pulling, or dragging a heavy weight. Pains worse in the latter part of the night.

*Dose:* As for Arnica.

**BELLADONNA.** Flushed face, red eyes, throbbing and heat in the head. Pain in the back, as if it would break. Severe bearing down, as if everything would fall out. Profuse discharge of blood, neither very bright nor very dark colored. Pains which come on suddenly and ceases just as suddenly. Great intolerance to light and noise.

*Dose:* As for Arnica.

**CHAMOMILLA.** Periodical pains resembling those of labor, with discharge of dark colored or coagulated blood. Violent pains in the bowels extending to the sides with frequent urination. Becomes almost furious about the pains. Hot perspiration about the head.

*Dose:* In every respect as for Arnica.

**NUX VOM.** Every pain produces a desire to evacuate the bowels or to urinate. Much pain in small of the back which is made worse by turning in bed, writhing pains in the abdomen accompanied by nausea or pains in the back or loins as if dislocated, constipation of large difficult stools. Persons of sedentary habits.

*Dose:* As for Arnica.

**PULSATILLA.** Labor-like pains, attended with hemorrhage; restlessness. The discharge is arrested for a little while, then returns with redoubled violence. Suffocative spells. She craves fresh air, and is worse in a warm, close room. Inclination to be chilly, even in a warm room. Mild, tearful women.

*Dose:* As for Arnica.

**IPECAC.** Profuse and continuous discharge of bright red blood, accompanied with a pressure downward. Cutting pains around the naval. Continual sense of *nausea*, without a moment's relief. Disposition to faint.

*Dose:* As for Arnica.

**CHINA.** In weak and exhausted persons, when there is loss of fluids. After miscarriage, when there has been loss of blood unto fainting, giddiness, drowsiness and loss of consciousness. Heaviness of the head, ringing of the ears, and coldness of the extremities. Twitching and jerking of single muscles.

*Dose:* As for Arnica.

**HOME REMEDIES.**—Something simple, and in almost every house, is Nutmeg, of which take one and grate into a bowl or cup, and pour boiling water on. Drink the tea. This often arrests very severe cases of hemorrhages.

## TREATMENT BEFORE CONFINEMENT.

## PREPARATION OF THE BREASTS.

Young mothers frequently find much difficulty in nursing their infants in consequence of some defect or incapacity of the nipple. In many instances the structure of the breasts is disorganized by an ignorant nurse having compressed them in childhood, under the idea that such barbarous management was necessary to expel some of the contents of the breast; mothers should be particularly watchful against this practice. The use of improper stays in after life, by which the cuticle is rendered so tender as to preclude suckling, often occurs.

The first two cases are beyond the power of art, and if suckling be attempted hardening of the nipple and breast ensues, attended with severe suffering. Another difficulty frequently occurring is a shortness or retraction of the nipple so that it is impossible for the infant to take hold of it. I have frequently had charge of young mothers whose nipples were so small that they were unable to nurse their babe. If this should be the case—if the nipple should be sunken instead of protruding—it has to be drawn out by means of some suitable instrument in the shape of shields or an exhausting pump; a convenient one, in many instances, can be made in this way: Take a bottle with rather a large neck, pour hot water into it, then empty and place the neck of the bottle over the nipple; the air cooling in the bottle will cause the nipple to draw down and thus lengthen it.

After the nipples have been drawn out they have to be gently pressed and worked with the fingers in order to harden them, lest the delicate skin should be injured by the sucking of the infant. During the two months previous to the expected confinement, the nipples should be washed every day with cold water, borax and water, alum and water or with rum or brandy. The whole breast should be washed quite frequently, more especially during pregnancy. It may also be here remarked that when any tenderness exists during the period of nursing the shield should be resumed between the intervals of the infant being applied to the breast, and the bathing continued—due care being always taken to lave the nipple carefully with tepid water before it is again offered to the child.

SULPHUR will frequently be found useful if an eruption breaks out on the nipples, six pills the first thing in the morning, after which the eruption generally disappears.

## PRECURSORY SIGNS OF PARTURITION.

A few days, or even two weeks, before confinement, the uterus begins to descend. Until the thirty-eighth to the thirty-ninth week of pregnancy the uterus keeps rising in the abdominal cavity, and the breathing is very much interfered with. As soon as the uterus begins to descend, the breathing becomes freer, and the pit of the stomach again becomes visible; but now the uterus presses upon the pelvis, like a heavy burden, and the female feels as if her hips would come apart. The small of the back is particularly affected by the presence of the child's head against the internal

surface of the sacrum, which sometimes feels bruised and numb, in consequence.

### HOME TREATMENT.

One month before child-birth take 4 oz. Castor Oil, 4 oz. Brandy. Mix them together and bathe the hips, bowels, and back two or three times a week, rubbing the mixture well in with the hand.

Another sign of impending parturition is the frequent and anxious urging to urinate, caused by the increasing pressure upon the bladder by the descending uterus. The last and most reliable sign of parturition is the appearance of the first labor pains, which may set in a few days previous to the act of parturition, but which, generally, are not felt until a few hours before the event.

### THE BOWELS.

If the bowels have been constipated, an artificial evacuation previous to delivery, may be obtained by a *lavement* of luke-warm water repeated with a small quantity of linseed or sweet oil, when necessary from a failure in the first attempt to obtain the desired effect.

*Injection.*—If of luke-warm water simply, inject about a pint; if the addition of oil be necessary, to a pint of water add two tablespoonsful of the oil; shake them well together in a bottle, or other closed vessel, and inject the mixture.

### PREPARATION OF THE BED FOR LABOR.

If the means allow, the confinement bed had better be arranged a few days previous to confinement, since at the last moment something might be forgotten, or a needful article might be wanting, because the hurry and anxiety of finding things are both unpleasant and injurious to the patient.

The best thing for a patient to lie upon, is a simple mattress, which should be slightly raised toward the head. The nates (hips) should be raised upon a cushion about a hand high, which may be covered with oil cloth or rubber cloth, or any common cushion may be used for the purpose, the object of which is to raise the body so as to procure the necessary space for an examination, and for the reception of the infant. The bed should be arranged so that every part of the body, from the nates to the head, is supported.

The body being thus supported, the following rules may be observed in regard to the thighs and legs: It is better to have the space between the thighs and the foot-board of the bed just long enough so that the feet of the patient may press firmly against the foot-board; but if the space should prove too much, a foot-bench may be placed between the bed and the feet, so that she can press against it without drawing up the knees.

It is sometimes necessary to have a cord or sheet attached to the foot of the bed, which the female may hold in her hands during the pains, for the hands are often spasmodically contracted during the pains, and it affords the patient great relief to hold something firmly in the hands at such a time. Holding another person's hands, likewise affords relief to the patient.

Persons frequently arrange the confinement-bed by the side of the



regular bed, into which they are lifted soon after the act of parturition is accomplished. However, those who do not find it convenient to prepare a separate couch, must protect the mattress by some old cloths, or oil or rubber cloths may be placed under them, to prevent the fluids lost by the mother and child from soaking the mattress. Even after parturition, it is best to leave the oilcloth under the patient, for the flow of blood continues quite freely for a few hours after labor. After preparing the bed for confinement, we will now consider—

### FALSE PAINS.

False pains sometimes precede labor but a few hours—but in many cases come on some days, or even weeks, before delivery, and chiefly differ from labor pains in these respects: they usually begin at the upper part of the womb, are seldom felt in the back, do not extend so greatly around the lower part of the body as the true pains, are either on all the time or appear with great regularity, and do not cause the womb to become firm and hard, while the true pains do. They are chiefly confined to the belly with sensibility to touch and movement, and in fact are very annoying. False pains can sometimes be distinguished from true ones by sitting over a vessel of warm water after which, if false, they will frequently abate, and if labor, they will continue with more regularity or strength.

### TREATMENT.

**BRYONIA** is indicated *when there are pains in the loins resembling a dragging weight, much increased by motion with pains in the abdomen, preceding those in the back.* This remedy is more particularly indicated when the above symptoms have been excited by a fit of passion or by taking cold.

*Dose:* Of a solution of six globules to four teaspoonsful of water give a teaspoonful. If soon after the administration of the first dose an aggravation of the pain ensues, pause until two or three more paroxysms have occurred; and if these succeeding pains prove to be of *diminishing* intensity or frequency, do not repeat the dose until relapse threatens. On the other hand, if no improvement is the result, repeat the dose after an interval of three hours, and so on if the proper time for the expected time for labor is not nearly due—discontinuing immediately on relief or change.

**NUX VOMICA.**—When the exciting cause seems to be constipation or mental irritation or too luxurious mode of living, stimulants or spirituous liquors, etc.

*Dose:* As directed for Bryonia.

**PULSATILLA.**—Abdominal pains and pains in the loins resembling those from continued stooping, or the pressure of a tight bandage attended with painful dragging and aching in the thighs, constipation or *relaxation*, mildness of temper or great sensibility; particularly when these pains seem to have arisen from indigestion brought on by rich indigestible food.

*Dose:* As directed for Bryonia.

## PARTURITION, OR LABOR.

During the first pains of the female, she may remain dressed and out of bed, because a certain unrest drives her from place to place, and it would not be best to confine her to her bed. But all things should be made ready; the attending physician should be sent for; warm water should be at hand; and in some convenient place in the sick room (all in one place), the infant's linen bandages, and little strips of linen, should be kept all ready; also, a pair of scissors and two pieces of string, each about one-half a yard long; the strings may either be tape, about a quarter of an inch wide, or cord of sufficient size and strength suitable for tying the cord attached to the infant; a little fresh lard, or oil, some soap and pins, should also be at hand.

Besides the attending physician and nurse, a friend may, likewise, be present in the sick room (if requested by the patient), in order to comfort and quiet the sufferer. But all superfluous persons, such as callers and children, *must be kept away*.

If the pains become stronger, the female should lie down. Perhaps by this time the water may break, which may take place with a feeble report. A young woman who has never borne any children, should be warned of this event, so as not to get frightened by the suddenness of the occurrence.

Nothing should be done, by irritating the neck of the womb, dilating the mouth of it, or by any other artificial means, to hasten the moment of delivery. This is the business of Nature, who knows best when the right time has come for ushering the child into the world. Every artificial interference is contrary to law, and is more hurtful than useful. Of course, these remarks apply only to natural labor. In preternatural labor, or those requiring mechanical means, the conduct of the attending physician depends entirely upon his or her own tact and knowledge.

The parturient female may adopt any position that is most comfortable to her—on the side or back, with her limbs stretched out or raised; but she must not bear down during a pain, until the right time for it has come. Premature bearing-down may result in distressing weakness of the womb; for not only the child, but the whole organ, is pressed by such untimely efforts. No bearing-down should be resorted to until the mouth of the womb is dilated so that the infant's head is protruded at least half its length. At this period, the patient may assist Nature by holding the breath and bearing-down during a pain, with her head bent forward (never backward, lest she should give rise to the formation of Goitre). During the passage of the head through the soft parts, the perineum (bridge between the front and back passage) must be properly supported, lest rupture might take place; at each pain, the attendant should place the palm of the hand against the perineum without, however, making any pressure against it, until the perineum remains hard and globular, even between pains. At this season, the patient may contribute a great deal to a rapid and successful delivery by a suitable position of the body. As soon as the head shows a tendency to pass through the vulva, the patient should remain quietly on her back, with her feet firmly pressed against the foot-board, and legs extended and stretched apart a comfortable dist-

ance. At this stage, all bearing-down may cease, lest a too rapid delivery of the head should rupture the perineum.

After the head is born, and the shoulders are still within the vagina, a short pause generally takes place, which must not be broken by any improper pulling on the head which may give rise to fatal dislocation of the vertebrae. Supporting the head with one hand, the abdomen may be gently rubbed with the other, in case the pains should not come on again with sufficient speed. The patient may now rest assured that, by assisting the remaining efforts of Nature, delivery will soon take place.

Occasionally it has happened that parturient females, while compressing the teeth during a hard pain, have broken off a portion of the tooth, or have lost the whole of it; therefore, it is always best to have a handkerchief or napkin placed near her, which she may crowd into her mouth as soon as the pain is approaching, or if she should be surprised too suddenly, one of her attendants must do this office for her.

#### THE PLACE OF THE ACCOUCHEUR (PHYSICIAN) AT THE BEDSIDE.

As soon as the labor pains assume an expulsive character, the attendant should place himself or herself by the side of the bed where they can use the right hand most convenient, and should not leave the bed-side of the patient. We may assist the female, either sitting or standing, according as is most convenient. The patient should not be uncovered, as it is entirely unnecessary to expose the patient's person, and is also risking the chance to take cold, which, at this time, would be very injurious. As soon as the little one makes its appearance into the world, it may be uncovered enough so that it may be wiped off with a soft cloth, which may be placed convenient for the purpose, but the mother need not be exposed, even at this time.

#### THE CARE OF THE CHILD DURING LABOR.

Immediately after the expulsion of the head we should feel with one finger about the child's neck to see if the cord is around it; in case it should be, a slight traction on the cord may loosen it from the placental end, so that it will slip over the child's head, leastwise will keep it from choking or strangling it.

When the head is born it should be carefully supported from the clots and other discharges from the uterus, patiently waiting for the work of nature to complete the delivery.

After the expulsion of the child, it is better to turn its back to the mother and let her covering fall between the child and herself, thus at the same time bringing the child to our full view and completely protecting the mother from cold and exposure. A soft cloth should now be used to wipe the child's face, eyes, and mouth. It usually cries lustily as soon as it is born, but it should be permitted to lie undisturbed for some four or five minutes, or until breathing is established. The cord should then be tied about three inches from the child and again about an inch further along the cord and then cut between the two places. The child should then be wrapped in a blanket and handed to a nurse to wash.

After it has been properly washed and thoroughly dried a piece of raw cotton or cotton batting the size of the palm of the hand should be laid on

the abdomen just above the navel, the remnant of the cord laid on it with its cut end pointing upward—the cotton being arranged so as to embrace the base of the cord—and another piece of cotton of the same size placed over the cord, the whole being kept in place by the usual belly band.

#### THE ATTENTIONS TO THE WOMAN AFTER LABOR.

After the child has been handed to the nurse the next care of the attendant is to look after the delivery of the placenta (after-birth); until it is removed and the uterus is firmly contracted there is more or less danger of flooding. In most cases there is a short suppression of the pains immediately after the expulsion of the child, after which the pains return in a diminished degree and the after-birth usually becomes detached and either lies free in the vagina or is expelled without the vulva. If it should not be outside the vulva a very slight traction of the cord a little upward and outward, taking hold close up to the person, will be all that is necessary to disengage it after which it should be carefully scooped up and placed in a vessel ready for its reception.

The woman should then be made comfortably dry and a soft dry cloth should be applied to the vulva. She should then be straitened out a little in bed and in all respects made as comfortable as possible, both mind and body, must be kept in a state of perfect repose; everything which may tend to arouse the excitability of the patient, such as talking, noise, strong light, and odor must be carefully avoided and the room be kept at a moderate temperature.

#### GENERAL MANAGEMENT, DIET, ETC.

In the first place we would most severely disapprove of administering *stimulating* and even spirituous beverages after delivery, which, far from possessing a strengthening property, tend only to excite the whole nervous system. As a usual thing for some time after parturition, nature calls for but little nourishment; it should be given only, and when the *woman herself*, expressly feels the need of it, and then let her partake of such nourishment as she particularly craves, (unless it should consist of rich meats, pastries, and vegetables which create gases in the stomach and bowels); however, we must allow nature to pursue her own course which, as a general thing, prescribes but little nourishment for the first five or six days after delivery, and thereby avoids the necessary calling of the bowels into action, which state of constipation (if it may be so called) is ordained for the wisest purposes and attended with the most beneficial results; the balance of the system is kept up by the passing off of effete matter in the shape of increased perspiration, etc.

Then we cannot sufficiently condemn the use of physics, which only tend to promote irritation and occasionally aid in bringing on puerperal fever and other evil consequences. In many cases this artificial relaxation also interferes with the proper secretion of milk. After the fourth or sixth day nature generally acts spontaneously. When it appears necessary to afford mechanical assistance we may do so by application of warm friction to the abdomen, or the employment of a lavement as directed to evacuate the bowels before confinement. When a costive state of the



bowels continues so long as to cause inconvenience, the appropriate medicine may be selected and administered according to the directions for constipation of pregnant females.

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### AFTER PAINS.

These pains, which frequently annoy the patient so much, especially if she be of highly nervous sensibility, and deprive her of the necessary rest, ought, under such circumstances to be subdued as soon as possible; by means of the following remedies good results will certainly follow.

### TREATMENT.

ARNICA employed internally, and also externally as a lotion, when there is a sore feeling all through the patient as if from a bruise. The pains are not very severe, but there is a bruised sore feeling with pressure on the bladder and retention of urine.

*Dose*.—Internal. Six pills every two hours commencing immediately after the delivery. Application—externally. To four table-spoonful of tepid water add fifteen drops of the concentrated Tincture of Arnica and apply to the parts.

CHAMOMILLA should be administered an hour after the second dose of Arnica when the after pains still continue to a severe extent and the patient is highly excitable and sensitive. It is sometimes beneficial to alternate the two.

*Dose*. Six pills repeated if necessary after the lapse of an hour from the first dose, then pause three hours and so on.

NUX VOMICA should be employed when the after pains are very severe and there is a continual inclination to relieve the bowels when lying down, but passing away when rising accompanied with inclination to cramp in different parts of the body.

*Dose*. As directed for Chamomilla.

PULSATILLA is to be preferred when the pains are protracted and the patient is of a mild, tearful disposition, but sensitive and easily alarmed about herself; the pains become worse towards evening.

*Dose*. Six pills as directed for Chamomilla.

SECALE is indicated in feeble, thin and delicate women when the pains are more particularly of a pressing or forcing nature similar to labor pains.

*Dose*. As directed for Chamomilla.

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### FLOODING.

With respect to the treatment of flooding or excessive discharge of blood as incidental to delivery, will require exactly the same medical and general treatment as is given in the article on miscarriage, page 630, and hemorrhagia page 641. It is to be remembered, however, that while in flooding after labor at *full* term, the application of cold to the abdomen is allowable in severe cases, while the *tampon or plug is not to be resorted to*.

It may be mentioned in addition, that pressure made upon the womb through the relaxed walls by clasping it with one or both hands equally and forcibly, but yet gently and without roughness, very frequently arrests the hemorrhage with great promptness.

#### RETENTION OF URINE. SPASM OF THE BLADDER.

During the passage of the child's head out of the womb it is sometimes pressed against the bladder with so much force, that it causes an inflammation and irritation of this organ. The best remedy is Arnica. Next to Arnica Cantharis or Nux Vom.

*Dose:* Four pills every half hour, especially if the urine passes off drop by drop and the discharge causes pain.

It may be well to apply warm cloths or other warm applications to the parts, for the warmth will have a relaxing tendency.

#### INCONTINENCE OF URINE.

An incapability of retaining the urine is, on the other hand, another not unusual sequel of protracted or severe labor.

#### TREATMENT.

The employment of Arnica, internally and externally, as advised under the head of "After Pains" at page 640, is, in the majority of cases, sufficient to overcome this weakness. When it fails to accomplish this object, the following remedies should be had recourse to:

PULSATILLA is frequently successful in remedying the defect in from two to four days.

*Dose:* Six globules three times a day for two days.

BELLADONNA may be given, if, in one or two days after the last dose of the foregoing medicine has been given, only partial relief has ensued.

*Dose:* As directed for Pulsatilla.

#### DURATION OF CONFINEMENT.

Strict attention should be paid to cleanliness and ventilation of the lying-in chamber. Everything that produces an offensive odor should be promptly removed from the room, and a draught of air should be allowed to pass through the room (not, however, across the patient's bed). The parts should be bathed daily with lukewarm water so long as the discharge continues; this should be performed *under the bed-clothes*.

The patient should make no exertion during the first three or four days, or at least until the proper secretion of milk; after that time, she may be carefully moved from the bed to a couch, long enough for the bed to be aired a little. After the tenth day, she may sit up, out of bed, for a short time, if she is able, which may be lengthened, gradually, from day to day, as she gains strength. Thus, too, she may begin to walk, little by little, until she gradually grows stronger and more accustomed to exercise. In summer, she may ride out during the third week; and in winter, during the fourth week, all things being favorable.

## CHAPTER XXXII.

## DISEASES FOLLOWING CONFINEMENT.

## SECRETION OF MILK.

This is one of the most interesting and remarkable changes occurring during the lying-in period. While the child is still in the uterus, all that pertains to the mother unites to affect its nourishment, growth and development there. Suddenly all this is interrupted, the child is expelled from the little world within, and has to find nourishment elsewhere. Nature intends it to be supplied, as before, from the maternal blood, though through the medium of the mammary glands. The *reaction* upon the organism, from this change from the uterus to the breast, causes what is called milk fever, in consequence of which there results a disturbance in the system, more or less well marked, according to the obstacles to be overcome.

In some cases appear chills, fevers, headaches, and a great variety of pains and suffering; while in others this period is passed without any of the above mentioned disturbances. As a general thing, all the disturbances incident to the coming of the milk, are less when the child is applied to the breast as soon after delivery as is practicable. Much advantage is gained, both to the mother and child, by this method, since it serves to lessen the suffering of one from hunger, and the danger of the other from fever.

## SUPPRESSION OR SCANTY SECRETION OF THE MILK.

It is of vast importance that the natural operations of the organism peculiar to this condition proceed with regularity. Among these the secretion of milk takes a prominent position, and its sudden suppression is apt to be followed by internal and local inflammation, flow of blood to the head, hot and cold flashes, etc. The use of the following remedies should be employed according to their indications.

## TREATMENT.

*PULSATILLA* should be promptly employed in cases of sudden suppression of the secretion of milk, whatever cause has occasioned it; and this medicine will frequently be found sufficient to restore the natural flow of milk.

*Dose:* Four pills repeated every four hours (or every eight in very mild cases) until change.

*BYRONIA* is to be preferred when there is oppression at the chest or stitching pains in the chest or side, or more particularly if the suppression can be traced to some sudden mental emotion or to catching cold.

*Dose:* As for *Pulsatilla*.

*CHAMOMILLA* should be selected, if the patient be particularly irritable and excitable, and the suppression be followed by intense flushing of heat or burning heat of the hands and face either with crimson flush or alternate flushing and paleness or one cheek red and the other pale.

*Dose:* As for *Pulsatilla*.

BELLADONNA should be given in cases in which the suppression is characterized by: redness of the face and general symptoms of congestion of the head, breasts feel heavy and appear red and the redness running in streaks over them; sensitiveness to noise, light, or touch.

*Dose:* As for Puls.

ACONITE should be given if active feverish symptoms, such as hot, dry skin set in, and, under such circumstances will remove the whole disordered condition with promptitude.

*Dose:* Four pills every two hours.

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## EXCESSIVE SECRETION OF THE MILK.

### GALACTORRHOEA

Occasionally, on the other hand, it happens that too abundant a secretion takes place, causing distention of the breasts with spontaneous flow of milk keeping the breasts constantly wet. Relief from such an uncomfortable state may be obtained by the appropriate remedy according to the indications below. The function of lactation being one purely physiological and provided for in the economy of suitable forces. Under the stimulus of maternal instinct and affection most women enjoy perfect health during its continuance. Many indeed are never so well as when giving suck to their children. Under the influence of this process, there arises a greater activity of all the functions at the same time and also a greater strength of appetite and corresponding energy of the digestive powers. The process of conversion of food is unusually rapid, the excess going to form milk. Where a greater amount is thus found than is required the system becomes gradually exhausted, even in health. This over-production may be due simply to excess of vitality, while it may result from the efforts of nature to supply the required material support even under difficulties. The following remedies will be found beneficial as the indications appear.

### TREATMENT.

ACONITE may be taken as a precautionary measure when there is high febrile action of the whole system and we are ignorant of the exciting cause.

*Dose:* Take four globules repeated at intervals of four hours, until the frequency of the pulse is diminished and the skin becomes moist.

RHUS TOX frequently proves of much service where febrile symptoms arise from distention of the breasts induced by an excessive secretion and indications of what is generally termed milk-fever (which, however, frequently arises from other causes.)

*Dose:* Three globules every six hours until amelioration or change.

CALCAREA CARB. should be employed in cases in which excessive distention of the breasts, spontaneous emission of milk and loss of flesh occur without any marked and active fever symptoms—or after the previous employment of Aconite or Rhus., when the fever symptoms have been allayed.

*Dose:* Six pills as directed for Rhus.



PHOSPHORUS is of especial value in cases of this kind when there are marked signs of a tendency to consumption and emaciation takes place rapidly. Phosphorus is yet further indicated when there are sensations as of a rush of blood with oppression at the chest and sometimes even short, dry, hacking cough.

*Dose:* Three pills as directed for Rhms.

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#### PERSPIRATION AFTER DELIVERY.

The increased perspiration which takes place after child-birth is, as before mentioned, a substitute for the suspended action of the alimentary canal, consequently its sudden suppression is unavoidably followed by an injurious result and not unfrequently followed by fever.

EXCITING CAUSES. Exposure to cold or a sudden chill or applying damp linen or clothing not well aired, are the most frequent causes.

#### TREATMENT.

DULCAMARA should be promptly administered when the perspiration has been checked by a chill, and in such cases a single dose will often restore the action of the skin and prevent further injurious consequences.

*Dose:* Four pills repeated, if there be a degree of effect after the lapse of three hours, but if no evident reaction should have occurred, proceed with the next remedy.

BRYONIA is to be administered when extreme oppression at the chest is present, or when there is a feeling of soreness and aching in all the limbs aggravated by movement.

*Dose:* As directed for Dulcamara.

SULPHUR should be employed after the foregoing medicines in cases in which such treatment is insufficient and there is more especially intense heat of the skin and distress.

*Dose:* As directed for Dulcamara.

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#### EXCESSIVE PERSPIRATION.

On the other hand an excessive perspiration is equally as harmful; it is chiefly injurious from the extreme debility and high susceptibility of taking cold which it occasions. It is generally brought about by keeping the room at too high a temperature, the use of too many bed-clothes or by stimulating beverages.

#### TREATMENT.

Our first care should be the removal of the exciting causes after which, if it still continues excessive, the following remedies may be employed.

CHINA should be employed if the perspiration be of an exhausting character and attended with great debility.

*Dose:* Six globules every three hours.

ACIDIUM SULPHURICUM is to be preferred when the perspiration is excessively profuse when lying still, but is diminished when moving about.

*Dose:* As directed for China.

## MILK FEVER.

The secretion of milk is considered an operation of nature and not one that requires medical aid for its regulation; but occasionally women suffer some slight uneasiness for a few days following confinement; and when any of the below mentioned group of symptoms present themselves, the affection is known by the name of Milk Fever.

**SYMPTOMS.** Shiverings and heat terminating in perspiration; the pulse is at first weak, changing to various phases, (sometimes quick and frequent), at others soft and regular; and in some instances these symptoms are attended with a drawing pain in the back extending to the breast, a disagreeable taste in the mouth, thirst, oppressive breathing, anxiety, headache, etc.

**EXCITING CAUSES**—are neglecting to put the infant to the breast sufficiently early, which allows the absorption of the milk into the circulation, mental emotions, fright or anger, and excessive talking.

## TREATMENT.

Nature herself, if not disturbed by improper treatment, will in most cases suffice to restore the equilibrium of the system; should the affection become aggravated we may dread the setting in of puerperal fever.

**ACONITE** must be employed in *all* instances where considerable fever is present, and will usually remove all the symptoms.

*Dose:* Give four globules repeated after the lapse of three hours if necessary.

**PULSATILLA** will be found particularly useful in severe cases, especially when caused by taking cold and appearing more like a rheumatic affection and have the general symptoms of milk fever.

*Dose:* As directed for Aconite.

**BELLADONNA** is very useful in particular cases in which complications with very severe disturbance of the brain, or when inflammatory action in the breast may supervene.

*Dose:* Three globules repeated at intervals of four hours, until a degree of improvement sets in, and then at intervals of six hours.

**RHUS** is also of considerable service when extreme fullness, tension and painfulness of the breasts, with excessive secretion of milk, attend the case.

*Dose:* As directed for Belladonna.

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CHILD-BED FEVER. PUERPERAL FEVER.

This trouble is of so grave a nature that it is with reluctance that we approach the subject. Where it is at all possible, we would advise a *skilled* physician to be employed. As this work, however, will enter some home where no physician can be procured, it has been thought judicious to treat of the disease at sufficient length to be available in cases of emergency.

**SYMPTOMS.**—This disease assumes various types and degrees, and has received various names. Usually the disease begins on the second, third,

or fourth day, although in some cases it even appears later, as late even as the eighth or ninth. It sometimes begins with a distinct chill, and again there may be only slight chilliness, imperfect and merely noticed. The pulse is very rapid, full and soft. In some cases there is neither pain, distention nor tenderness of the abdomen; while in others the pain is very acute, the distention enormous, and the tenderness exquisite.

Profuse sweating is a very common and distressing accompaniment of this disorder; the sweating of puerperal fever does not diminish the amount of urine, nor abate the quickness of the pulse. An intolerable thirst prevails, and the patient drinks immense quantities of whatever fluid she may be allowed. Dark spots appear on the wrists or other parts of the body.

At first, the lochia may be unaffected; they may be even increased in quantity, but more commonly they are entirely suppressed. As the disease advances, usually about the third day, diarrhœa and vomiting may supervene. The patient becomes listless and languid, losing all interest in surrounding circumstances, and even in her child, and the expression of her face indicates anxiety and great prostration; or, on the other hand, she may be unduly excited, nervous and tremulous. If the disease progresses in spite of treatment, delirium commonly supervenes. Rattling of the breathing, with enormous distention of the abdomen, are usually regarded as fatal symptoms.

As the disease advances, the womb, the peritoneum and other organs, and tissues of the abdomen become involved in the prevailing inflammation. The first symptoms of this disease are similar to those of "milk fever," but the distinction is to be made by the fact of absence of pain, and more particularly by absence of tenderness in the abdomen.

**CAUSES.**—This disease may result in consequence of a chill occasioned by a draught of air, or other cause, or from the use of damp or wet linens, or it may be occasioned by violence; or again, it may be impossible to assign any reason for its occurrence; in which case we are led to believe that it is due to infection, or arises in consequence of some lurking taint or predisposition of the system.

### TREATMENT.

**ACONITE** should be employed at first being indicated by the feeble condition, and by other circumstances; and will in very many instances, when promptly administered, particularly in those cases of a more simple form, serve to dissipate the entire disordered condition, and restore harmony to the system in an almost magical manner.

*Dose:* Give four globules every hour, or half hour, according to the severity of the symptoms. If, at the end of twelve hours, the symptoms have abated, the intervals may be extended two or three hours.

**BELLADONNA** should be administered when the pain is violent and cramp-like, coming on suddenly and ceasing as suddenly, with swelling of the abdomen; or the pains are forcing, as if the contents of the abdomen would be forced out; sensitiveness of the belly to the touch, she cannot even bear the jar of the bed; redness of the face and eyes; headache; dry mouth, with red tongue; sleeplessness and restiveness; delirious; suppres-

sion of the lochia or escape of red and fetid blood; the breasts are red and inflamed, or swollen and empty.

*Dose:* As directed for Aconitum.

HYOSCYAMUS may be used in some cases of a similar nature to that indicative of Belladonna, but where the disease has been developed by mental emotions and is characterized by spasmodic symptoms, jerks and twitches, delirium, throwing off of the bed-clothes and desire to be uncovered, etc., it is more particularly indicated.

*Dose:* As for Aconite.

BRYONIA will be found useful in cases in which the abdomen is swollen equally and is sensitive to the touch; violent splitting headache the pains are aggravated by the slightest motion; sitting up or even raising the head causes nausea and fainting, great thirst with desire for cold drinks; the patient is irritable or restless and apprehensive as to the results of her sickness.

*Dose:* As for Aconite.

RHUS TOX. is suitable when the fever is of a low typhus grade; the patient is very restless, constantly tossing about. The lochia is again tinged with blood or clots of blood are discharged; aching soreness and stiffness of the limbs; the tongue is red.

*Dose:* As for Aconite.

MERCURIUS is indicated by dejected expression of countenance; great thirst; constant flow of saliva; lancinating, boring or pressive pains in the belly; profuse sweat which does not relieve; mucous or bloody diarrhœa or ineffectual desire for stool; very offensive wind; the symptoms are usually aggravated at night.

*Dose:* Give four pills every two hours until improvement or change.

NUX VOMICA is suitable at the commencement when the lochia has been suddenly arrested by some mental emotion such as vexation; frequent desire to urinate, with pain, scalding, and burning; heaviness and burning in the abdomen; pain in the small of the back, worse in the morning; frequent and ineffectual urging to stool; despondency; sleeplessness or else dreaming frightful dreams; the symptoms are usually aggravated early in the morning.

*Dose:* As directed for Mercurius.

COLOGYNTH will be found valuable when the abdomen is greatly distended and the pains are unbearable, being of a sharp, cutting or lancinating character, which cause the patient to draw the thighs up as close to the belly as possible; diarrhœa with colicky pains aggravated or excited by eating or drinking.

*Dose:* As for Aconite.

CHAMOMILLA is useful for cases in which the breasts are flaccid and without milk; diarrhœa; pains in the abdomen like pains of labor; general heat with redness of the face, or one cheek is red and the other is not; great agitation, impatience and nervous irritability.

*Dose:* As for Mercurius.

ARSENICUM will prove valuable when there are great anguish; sudden



prostration; sunken countenance with a sallow complexion; extreme restlessness and anguish with fear of death; sleeplessness; dry and parched lips; great thirst with desire to drink but little at a time; burning heat in the abdomen; feeble and intermittent pulse with coldness and desire to be covered.

*Dose:* As for Aconite.

SECALE is good where there is strong tendency to putrify; the discharge is pus-like and offensive.

*Dose:* As directed for Mercurius.

DIET AND REGIMEN.—The most absolute repose of mind and body should be secured; all noise should be shut out, the room darkened and a moderate temperature maintained; the room should be well ventilated, so as to have the air changed without admitting a cold draught. Purification of all aliment must be enforced and the thirst allayed by small quantities of cold water which should be iced in summer or when vomiting is present. If the lochia is suppressed flannels wrung out of warm water may be applied to the external genitals, or a tepid injection may be thrown into the rectum, if there be great constipation; but it must be a small quantity that the bowels may not be much disturbed. The infant should be removed and fed on cow's milk and water until the patient is out of danger.

#### LOCHIAL DISCHARGE AND IRREGULARITIES.

By the detachment of the placenta from the inner sides of the womb, the parts are left open, and for some days after confinement the vessels discharge blood; in six to eight days this changes to serum, and finally to a white purulent mucus. This is the lochial discharge. In most cases it lasts from two to three, while in others it continues several weeks. In cases where it becomes suppressed suddenly, it needs medical attention, also when profuse and long continued.

CAUSES.—Profuse and protracted lochial discharge may be frequently traced to sitting up too soon after confinement, or to keeping the room too warm, or to mental emotions.

TREATMENT.—If, after nine days, the discharge continues profuse, containing pure blood, whereby an unnatural state is indicated, one or more of the following medicines may be required:

##### FOR EXCESSIVE DISCHARGE.

BRYONIA is to be preferred when the discharge is of a deep red color, and is attended with internal burning pain in the region of the womb.

*Dose:* Six globules, three times a day.

NUX VOMICA is usually required when a chill or the use of stimulants has produced the mischief, and the patient is affected with severe pains in the back, and a constant and fruitless urging to stool.

*Dose:* As for Bryonia.

CALCAREA is most particularly indicated when troublesome itching of the parts is experienced; or when the discharge is protracted, and occurs in women of full habit.

*Dose:* As directed for Bryonia.

SILICEA should be employed when pure blood flows with the lochial discharge every time the infant is placed at the breast.

*Dose:* As directed for Bryonia.

#### SUPPRESSED DISCHARGE.

PULSATILLA.—When the lochial discharge is suddenly suppressed—which it sometimes is from a variety of causes—and from this cause puerperal fever is threatened to ensue, the danger may frequently be warded off by the administration of this medicine.

*Dose:* Four pills every four hours.

ACONITE will generally suffice if promptly administered when the sudden suppression is caused by fright, and is attended with febrile symptoms.

*Dose:* Four globules every hour until relief.

DULCAMARA will be found beneficial when the suppression is caused by exposure to damp or cold.

*Dose:* As for Pulsatilla.

BELLADONNA. Where sudden suppression is followed by congestion of the brain, with flushed face, delirium, etc.

*Dose:* As for Aconite.

#### OFFENSIVE DISCHARGE.

CARBO-VEG should be administered, if the discharge becomes thin, and offensive.

*Dose:* Six pills four times a day.

KREOSOTE or SECALE should be given twelve hours after the sixth dose of Carbo-Veg, if the discharge should still continue offensive.

*Dose:* As for Carbo-Veg.

#### DIARRHŒA OF LYING-IN WOMEN.

Diarrhœa at this time is to be looked upon as a serious occurrence and immediate means must be employed for its correction by proper remedies.

DULCAMARA is generally indicated by the cause of the trouble being a check of the naturally increased perspiration from a chill.

*Dose:* Four globules administered every three hours.

PHOS. ACID is most effectual for the treatment of painless and almost involuntary evacuation.

*Dose:* As directed for Dulcamara.

ANTIMONIUM CRUD. is generally sufficient when the evacuations are thin and watery and offensive. The tongue is coated white.

*Dose:* As for Dulcamara.

RHEUM is to be preferred in cases which, in addition to the indications afforded for the last-named remedy. The evacuations and the body emit a sour smell.

*Dose:* As for Dulcamara.

PHOSPHORUS should be employed in very obstinate cases when the discharge is watery and almost painless.

*Dose:* As for Dulcamara.

VERATRUM should be given if the discharges are very profuse and watery attended with much pain, chilliness, coldness of the surface and cold sweat on the face.

*Dose:* As for Dulcamara.

For cases in which neither of the medicines above mentioned have the desired effect consult the "Article on Diarrhœa" page 280.

### WEAKNESS AFTER DELIVERY.

We frequently find our patient very weak after delivery, especially if there has been considerable loss of blood, for which the following remedies will prove effectual.

#### TREATMENT.

CHINA ranks first of all and will generally be found efficient in restoring the vital energies; especially when there has been considerable loss of blood or very profuse sweating.

*Dose:* Give six pills every three hours for the first two days, after that give twice daily.

ACONITE should generally be given at first when there is nervous weakness attended with great restlessness and want of sleep.

*Dose.* As for China.

SEPIA. This remedy is indicated when there is a painful sensation of emptiness at the pit of the stomach. Icy coldness of the feet and hands; the urine deposits a very hard crusty sediment; flushes of heat and loss of appetite.

*Dose:* Six pills once in six hours.

SULPHUR. Weak fainting spells coming frequently during the day; feels very faint and weak from eleven to twelve every morning; flushes of heat; cold feet; heat on top of the head.

### ABDOMINAL DEFORMITY—PENDULOUS ABDOMEN.

Abdominal deformity is more common to those women who have borne many children, or to those who present a disposition to corpulency. It may be caused by wearing tight stays, which have a tendency to relax the abdominal muscles, and increase the existing disposition to this affection; or it may take place in consequence of a strain upon the muscles of the belly during pregnancy.

#### ACCESSORY MEASURES.

An elastic bandage laced at the back, and exerting an equal pressure over the whole of the abdomen may be worn with advantage. In some cases where there is a tendency to this affection, particularly in corpulent persons, we may *soon after delivery* have recourse to mechanical aid by

transferring the support of the abdominal muscles to the shoulder, by the aid of a properly constructed apparatus; but we must in the strongest manner object to this, or any other pressure being exercised upon the abdominal region during pregnancy, as such a measure is obviously calculated to entail injurious consequences upon the offspring.

**DIET AND REGIMEN.** Spare diet and regular exercise must in all cases be observed.

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### SORE NIPPLES.

In a previous chapter I have shown the necessity of preparing the nipples for their new function. In spite of all care, however, the nipples sometime becomes sore three, four or six days after confinement, especially if the skin is very fine and delicate. This is a most distressing affection, because of the cracks opening whenever the child takes hold to suck. If the nipples are too short, the shield before mentioned should be worn between the interval of nursing. In case however the nipples should be insufficient, or their tenderness remain in spite of treatment, nursing may yet be accomplished by using a proper shield, or artificial teat, numerous and excellent varieties of which may be procured. It is well to bathe the nipples with warm water and milk, or with borax water, as soon as the babe is done nursing, being sure to wash the breasts as soon as it is ready to nurse again.

ARNICA employed internal and externally, this remedy will very often obviate all further inconvenience, if used at the onset.

*Dose:* (Internal): Four pills three times daily. Application (external): To a half teacup-full of water add fifteen drops of concentrated Tincture of Arnica with which a small strip of linen may be wet and applied to the nipple, this may be repeated three times a day.

CHAMOMILLA. The nipples are much inflamed, and are very tender, she can hardly endure the pain of nursing; she feels irritable and cross with impatience.

*Dose:* Four pills three times daily.

SULPHUR should be given, if after nursing the nipples smart and burn badly, they chap badly about the base and bleed.

*Dose:* Six pills night and morning.

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### INFLAMMATION OF THE BREASTS.

One of the greatest obstacles to nursing an infant is inflammation of the breasts. The breasts become red and inflamed, occasionally suppurating in some parts which open, and discharge, while others still remain hard, and inflamed, which either end in suppuration, or in the formation of hard lumps.

**CAUSES** which produce this disorder are numerous. Anything which may operate as an exciting cause to disturb the local secretion, such as fright, passion, cold, etc; though it not unfrequently arises without being able to trace it to any particular origin. Inflammation of the breasts frequently arises from not applying the infant to the breast soon enough



after its birth; and occasionally from a sudden cessation of suckling caused by the death of the infant, or from disinclination of the child, to suck, or from other reasons.

When the milk is copiously secreted, and either from inability on the part of the child, or from the obstruction of the milk tubes, or from deficiency of the nipple, the milk cannot be freely drawn in the natural way, every effort should be made without loss of time to secure this end by such other means, as may be possible. Sometimes the breast may be drawn by another child, or by a friend, or by young puppies. The proper remedy should be selected, and faithfully administered in order as rapidly as possible to remove all difficulty. In cold weather the breast should be warmly protected. If the inflammation is caused and kept up by a tender and ulcerated state of the nipples, let these be particularly attended to, in accordance with the directions already given. (For further particulars see Mastitis, page 384).

### TREATMENT.

**ACONITE.** When a chill in dry cold air has been the exciting cause, and there is high fever prevailing. There is fear, anxiety, and restlessness, thirst for cold water, etc.

*Dose:* Six pills every hour until the fever moderates.

**BELLADONNA.** When the breasts feel heavy; there are red streaks running like radii from a central point; she is occasionally chilly, a dull and stupid feeling prevails. It is well to alternate Aconite with this remedy.

*Dose:* Four pills every two hours.

**RYONIA.** Her breasts have a stony heaviness in them, they are hot, hard, and painful, but not very red. She feels sick when first sitting up in a chair and still more sick on standing up, rough dry lips, thirst, and constipation, stools dry looking as if burnt, she feels worse when moving, and wishes to keep still.

*Dose:* As for Belladonna.

**PHOSPHORUS.** Inflammation of the breasts, threatening ulceration with cutting or stitching pain. Hectic fever and night sweats, deep ulcers with blue appearance.

*Dose:* Six pills every six hours.

**SULPHUR.** The inflammation runs in streaks from the nipple, suppuration profuse, with chilliness in the fore part of the day, and heat in the after part. Some piles in complication. The breasts feel hot. She has night sweats, flushes, or heat, weak and faint spells, irresistible hunger at 11 A. M.

*Dose:* Six pills every twelve hours.

Another treatment of gathered breasts, which has never been known to fail, if employed as soon as threatened, is this: take of chloroform and glycerine equal parts. As the substances are of unequal weight, the vial containing them should be thoroughly shaken, the mixture quickly applied, and the part covered with oiled silk, or something equally impermeable, to prevent too rapid evaporation.

## Part Fourteenth.

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### TREATMENT OF INFANTS.

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### CHAPTER XXXIII.

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#### TREATMENT AFTER BIRTH.

As soon as the child is born it should be wrapped in a soft woolen cloth, it first being warmed, as care should be taken to gradually inure the infant to the temperature of the surrounding atmosphere. The skin should then be gently washed with a little warm water; or it may be annointed with lard, using a little fine toilet or castile soap in the water with which it is washed, but care must be used in the first washing lest it should get chilled. It is best only to wash part of the body at a time keeping the other parts protected. After washing the skin ought to be dried immediately to avoid the risk of taking cold. The child should be bathed every day, gradually lowering the temperature of the water after weaning. The best time for bathing is in the morning soon after being taken out of the bed.

I wish I could impress every mother with the importance of dressing their infants in a more suitable manner. The practice of bandaging and swathing the tender bodies of their infants and loading them with a superfluity of clothing, which, by its weight and length presses upon the lower extremities and is frequently the cause of deformity and weakness in after life, and moreover causes rupture of both navel and groin.

#### STILL-BORN CHILDREN.

##### SUSPENDED ANIMATION.

CAUSES—in many cases arise from difficult parturition, pressure of the cord around the child's neck, natural debility arising from some scrofulous or syphilitic taint of either or both of the parents; or from accumulation of mucus in the nose and throat; or, if delivered with forceps, it might be caused by an injury from them; or again, it is caused by too sudden alteration of temperature, the action of the lungs not having commenced.

##### TREATMENT.

From whatever cause the apparent death or suspended animation of the child should result, no time should be lost in making proper efforts to establish respiration.

MECHANICAL MEANS to be employed is to immerse the child suddenly into cold water, or better still, cold or even iced water should be

poured over it. In some apparently lifeless children pouring cold water on the head and letting it run down over the body establishes the circulation and respiration; the child should then be wrapped in woolen blankets until quite restored. Of course, in all those cases where the breathing is prevented by an accumulation of mucus in the throat and nose, such measures should be employed as to remove such obstructions. Should these methods fail, the one of which a description may be found in the article on "Apparent Death from Suffocation," will have to be resorted to. Should this method fail, the lungs may be directly filled and respiration may be excited by an adult placing his or her mouth directly over the mouth of the child, closing the child's nostrils between the thumb and forefinger of his hand and blowing air into the child's lungs, and, when filled, by gradually and carefully compressing the walls of the chest, emptying the lungs again. This should be repeated again not oftener than from ten to fifteen times in a minute. This artificial respiration, and all other methods employed to restore suspended animation, should be persevered in for some time, life having returned after the lapse of an hour from judicious and careful treatment.

**MEDICINAL TREATMENT.** — If the child should still continue to breathe feebly and imperfectly after animation has been restored, the following remedies may be resorted to.

**ACONITE** if the child is hot, purple-hued, pulseless, and breathless or nearly so.

*Dose:* Two pills on the infant's tongue.

**BELLADONNA.** The face is very red and the eyeballs are greatly injected.

*Dose:* As for Aconite.

**CHINA** if the face is pale, the infant small and of a delicate frame and in cases where the mother has had profuse hemorrhage.

*Dose:* As for Aconite.

**OPIUM** is good if improvement takes place slowly and the face is livid and bluish.

*Dose:* As for Aconite.

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### SWELLING OF THE HEAD.

Immediately after birth the head of the infant appears more or less swollen; this in most cases is but a trifling affection and will disappear of itself; medicinal treatment may sometimes be required.

**ARNICA** or **Rhus** will usually be sufficient to hasten the swelling to subside; when it is very extensive it is necessary to resort to external application of the same remedies.

*Dose:* Two pills repeated again in twelve hours.

**Application—external:** To four tablespoonsful of water add six drops of the tincture and apply this lotion to the part, repeating the operation after the lapse of twelve hours.

If there should result an ichorous discharge and caries of the bone and prostration.

*CALCAREA* will in many cases produce a cure.

*Dose*: Two pills every second day.

*SILICEA* is useful if the trouble yields slowly to *Calcarea* to finish the cure.

*Dose*: Two pills as for *Calcarea*.

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## RUPTURE IN INFANTS.

### NAVAL RUPTURE.

Hernia or rupture may be developed before birth and a predisposition to this affection may be observed in children whose parents are similarly affected. The mechanical treatment of naval rupture is as follows:—Take a piece of lint or soft cloth just large enough, when folded five or six times to cover the rupture effectually, then press in the protrusion and keep it reduced with the hand until the compress is rightly adjusted and secured in its position by means of two strips of adhesive plaster placed over the compress in the form of a cross.

Another compress may be made by taking a button-mold about an inch or an inch and a quarter in diameter and cover it with a piece of soft linen; apply and secure it the same as the before mentioned compress, or by a bandage made of suitable form to secure it properly.

This disease being frequently brought on by violent fits of crying, to which delicate children are subject, the bandage may be worn for some time after the cure as a precautionary measure against its return.

It is best to administer a remedy or remedies in order to assist the mechanical measure, and in nearly every case whether subsequent treatment be required or not.

*NUX VOMICA* may be looked upon as a medicine of primary importance.

*Dose*: Two pills every morning and evening.

*ACONITE*.—This remedy is suitable when the infant feels hot and is restless; in that case it is best to give it in alternation with the *Nux*.

*Dose*: Two pills in alternation with the *Nux* every six hours.

*CHAMOMILLA* is sometimes of service; more particularly when the infant is very fretful and the motions of the bowels be too relaxed and of an unhealthy color, or if there be evidence of griping in the bowels.

*Dose*: As for *Nux*.

*SULPHUR* is also of great service after any of the previous remedies in obstinate cases when there has been partial improvement, but the treatment prescribed has been insufficient to complete the cure. It is also good for the treatment of soreness of the navel, remaining after the ligature has fallen off, or even before this takes place,

*Dose*: As for *Nux*.



SILICEA should be given four days after the fourth dose of Sulphur in cases of soreness of the navel in which no decided improvement has been effected by the last named medicine.

*Dose:* As for Nux.

#### RUPTURE IN THE GROIN.

All the remedies just enumerated are just as good in those cases of rupture in the groin, which are occasionally met with.

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#### WHEN MAY THE CHILD BE PUT TO THE BREAST?

Even *before* delivery the breasts secrete a milky fluid; the genuine milk is only secreted *after* delivery. In some instances it has been the custom to draw off this first milk and feed the child in the meantime on catnip tea or chamomile tea, cracker water, or thin soup, etc. Nothing can be more irrational or inhuman. Nothing is more calculated to expel the meconium, (the excrementitious matter discharged from the bowels of a new born infant), than the first milk, which has a slightly loosening effect upon the child's bowels. It is evident that nature has designed it so, else why should the milk be secreted and the child created with a desire to suck as soon as born?

After having a few hours rest the mother may take a little nourishment, if she should desire it. After this, the child may be put to the breast; if the mother should feel rested before, and the child should desire, it can nurse before, and at all events do not let more than twelve hours elapse before letting the child nurse. If the child was born in the evening or night, it need not be put to the breast before morning, especially if the mother sleeps; often both mother and child sleep till morning, but if it should wake and become restless, it may be fed on a few teaspoonsful of water and milk, of equal parts, sweetened.

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#### OBSERVATIONS ON THE SUCKLING OF THE INFANT.

Conquist, whose opinion in this respect we perfectly indorse in his "Outlines of Midwifery," remarks:

"Unless very peculiar urgent reasons prohibit, a mother should support her infant upon the milk she herself secretes. It is the dictate of reason, of nature, and of common sense. Were it otherwise, it is not probable that so abundant a supply of suitable food would be provided to meet the wants of an infant when it enters upon a new course of existence.

It is difficult to estimate the mischief resulting from infants being deprived of their natural nourishment; for, however near the resemblance may be between food artificially prepared and breast milk, still reason and observation demonstrate the superiority of the latter to the former.

As a further inducement, it should be remembered that medical men concur in the opinion, that very rarely does a constitution suffer from secreting milk; whilst the health of many a woman is most materially improved by the performance of the duties of a nurse.

Presuming that the laudable determination is formed to indulge the

child with that nutriment which is designed for its support, it becomes necessary to state that unless very strong objections should exist, *twelve hours* should never elapse before the infant has been put to the breast. Instinct directs it what to do, and the advantages of allowing it to suck soon after birth are many and important, both to the mother and child. By this commendable practice the patient is generally preserved from fever, from inflamed and broken breasts, and from the distressing and alarming consequences resulting from those complaints.

If the breasts should not have secreted milk previous to delivery, the act of suckling will encourage and expedite the secretion. Thus the mother will be saved from much of the pain connected with distended breasts, besides which, if the infant be not put to the nipple until the breasts become full and tense, the nipple itself will sometimes almost disappear on account of its being stretched, and without much and effectual labor on the part of the child, it cannot be laid hold of; and even then the pain endured by the mother is exquisitely severe, and not unfrequently the cause of sore nipples."

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#### THE CHOICE OF A NURSE.

For those who cannot give suck to their own children, the selection of a nurse is of great importance, and the medical attendant ought generally to be consulted, and the following points merit particular attention:

She should be of sound constitution and of good health, of full and moderate plumpness, with a fresh complexion, and clear *eyelids, free from any appearance of redness, scurfiness or thickening*. She should be thoroughly exempt from glandular enlargements, and possess deep red lips without cracks, sound white teeth, and well-formed, moderately firm breasts, with nipples free from excoriation or appearance of eruptions; the child of the nurse is one of the best criterions to judge by—its being plump and healthy is a great point in her favor. We should also endeavor to discover if she is free from any hereditary taint; she should, moreover, be of a mild-patient and equable temper, not irritable, or disposed to fits of passion, or nervous; of regular and temperate habits, and fond of children. She ought also to be about the same age, and to have been delivered about the same time, or, at least, within three months of the same period as the mother; with respect to age, we must, of course, avoid extremes. A woman, having given birth to a child very late in life, should choose a nurse several years her junior, and fully qualified for her duties; the reverse of the rule applies to extremely young mothers.

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#### DIET DURING NURSING.

As regards the nurse's diet, it should be simple and easily digested, and she ought to live upon a proper proportion of animal and vegetable food. Nature generally provides for the increased call upon her powers by suppression of the menstrual discharge, and a moderate increase of appetite, which may be safely indulged; but all food of a highly concentrated, heavy description, is injurious, causing the milk to become unsuited to the delicate digestion of the infant; the best guide, in the majority of cases, is

the regular Homœopathic regimen, which may be consulted with advantage. Reference must, however, be had to constitution; thus, a strong woman of full habit will not require much animal food, and will have, generally speaking, a plentiful supply of good milk, if she drink nothing but gruel, barley water, toast water, cocoa, tea, etc.; whilst, on the other hand, a woman of somewhat delicate constitution and languid circulation, will want more nourishing food, milk, etc.

But we cannot too strongly repudiate that too prevalent but deeply erroneous idea that women, during the period of sucking, necessarily require *stimulants* to keep up their strength; under this impression, both wine and malt liquors,—and, among the latter, more particularly porter,—are frequently resorted to. Porter is not only injurious, from its stimulating properties, but the deleterious effect which the different ingredients composing it produce upon the milk, forms one of the most prolific causes of the many evils that attack infancy. We shall conclude this part of the subject with a single quotation from a well-known medical writer:—

“There is an evil too generally prevalent, and most pernicious in its consequences on individuals and society, and by no means confined to mothers in the lowest classes of the community, which cannot be too severely reprobated; it is the wretched habit of taking wine or spirits to remove the languor present during pregnancy and suckling. It is a practice fraught with double mischief, being detrimental both to mother and child. The relief afforded is temporary, and is invariably followed by a degree of languor which demands a powerful stimulus, which at length weakens, and eventually destroys the tone of the stomach, deteriorates the milk, and renders it altogether unfit to supply that nutriment which is essential to the existence and welfare of the child.”

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#### SUPPLEMENTARY DIET OF INFANTS.

Unfortunately, some mothers do not possess sufficient milk for the proper nourishment of their offspring; if this arises merely from a deficiency in the secretion, and the woman is in other respects healthy, we must have recourse to supplementary diet to make up for the diminished quantity of the natural nutriment. Goat's, ass's, and cow's milk are excellent substitutes, especially the latter, diluted with one-third of water; goat's milk being apparently objectionable from its peculiar aroma. The milk, therefore, of the cow ought, when possible, to be obtained, and, if given undiluted, to be boiled,—cow's milk being generally considered too heavy, which boiling in a great measure obviates; it ought also to be slightly sweetened, so as to resemble as closely as possible that of the nurse, and should, moreover, be about the same temperature, say from ninety-six to ninety-eight degrees, —a point less regarded than it should be, and easily determinable by the thermometer. If any constitutional taint exist in the mother, the sooner the child is transferred to another breast, the better for both parties; and if a nurse be not procurable, the above will generally prove sufficient nourishment until the front teeth appear, which is a clear indication that the digestive organs are prepared for more solid food; if, however, the milk diet appears to disagree with the infant, we may give thin water gruel, or mix a little thin arrow-root, rusk, or well toasted bread in water, to which

the milk may be afterwards added; such alterations in diet are, however, but rarely required.

We may here observe that no portion of the milk ought to be retained for a subsequent meal, from the quickness with which it becomes sour; the same remark applies to any of the above preparations, in which milk forms the principal ingredient.

In the cow's milk, at first diluted as above prescribed, we may, after two or three weeks, gradually diminish the quantity of the water, as the digestive organs become stronger; but we cannot too stringently press the point, that, where it is at all practicable, the child ought to derive as great a portion of its nutriment as possible from the breast, no food being able efficiently to supply the place of that which nature intended for it at its birth.

When it is necessary to give supplementary nourishment, a sucking-bottle ought to be used, as the best imitation of nature, in giving the food slowly; particular care being taken to observe the utmost cleanliness. The child ought, in feeding, to be kept in a reclining, not supine position, as the latter frequently causes it to incur the risk of suffocation; and when it evinces disinclination to its food, no more should be offered.

The child should be accustomed to take its nourishment from each breast alternately; as, if this precaution be not adopted, inflammation is likely to arise in the breast not used, and the child is apt to become crooked, from being always retained in the same position.

The physician is frequently asked how often the child ought to be applied to the breast; the best rule on this point is, to give the breast when the infant desires it, and to withdraw it when the child appears satisfied. As the infant increases in strength, it may be easily accustomed to regular hours. It should not be permitted to "lie at the breasts" during the night; which is a most pernicious practice for both mother and child.

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#### DURATION OF SUCKLING—WEANING.

The period of suckling ought seldom to last longer than forty weeks; but in this we must be guided, in a great measure, by the constitution of the infant; weak, ill-conditioned children, in whom teeth are long in making their appearance, it has been recommended to continue at the breasts for eighteen months, or even a longer period. Weaning ought, in fact, to be regulated by the constitution both of mother and child. The full development of the front teeth, which in healthy children is from nine to ten months, but in delicate or scrofulous constitutions is delayed for several months later, has been considered the best indication of weaning; but this is by no means an unexceptionable rule. If the strength of the mother appears unequal to the task, and the supply of milk begins to fall off, the child may be gradually weaned, even before the teeth appear; still, even when the supply is ample, and the mother and child are apparently strong, a continuance of suckling beyond the tenth month is generally injurious alike to parent and child.

Weaning should not take place *suddenly*, but the infant should be gradually accustomed to other food, and a less frequent administration of



the breast, until entirely weaned; the time to commence this gradual course is upon the first appearance of the front teeth, so that the weaning may terminate with their full development; thereby the secretion lessens by degrees, preventing all evil consequences of swollen or inflamed breasts, and the child also becomes quietly reconciled to the deprivation.

Weaning ought not, however, to take place, if the child suffers considerably from the irritation of teething, or any acute infantile disease.

When, however, it is found absolutely necessary to wean, the above precautionary measures should be observed, both with respect to the mother and child.

#### FOOD OF THE INFANT.

After the child has been weaned, its nourishment should generally consist of the same simple food as before mentioned. The transition to a more substantial diet ought to be extremely gradual and guarded, and no material alteration made until after the appearance of the eye-teeth.

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#### SLEEP—SLEEPLESSNESS.

From the inability of the infant itself to maintain a proper degree of warmth, it should sleep by its mother's or nurse's side, for at least the first six weeks, particularly during winter or early spring. Care must be taken not to overburden it with bedclothes, and to place it in such a position as to prevent it slipping under them, and thereby becoming exposed to the risk of breathing a vitiated atmosphere, or even of suffocation; after six or eight weeks, when the organism becomes stronger, and able to preserve a proper degree of natural warmth, a separate bed or cradle will be more conducive to the health of the infant; this change of arrangement will be found beneficial to both parties—to the child, from its breathing a purer air; and the mother, being freed from the necessary watchfulness and restlessness consequent upon the child sleeping with her, will enjoy better health, and be more likely to secrete good and nutritious milk. Moreover, sleeping in the same bed with an adult, and particularly with an old person, is somewhat detrimental to the health not only of infants, but even of children.

As to the length of sleep allowed to the infants, the chief business of the first months of its existence being sleep and nourishment, we may safely leave the point to nature, and not attempt to coerce the inclinations of the child; if the infant is lively on waking, we may conclude it has not slept too much; and as it increases in vigor, and is able to endure longer intervals of wakefulness, we may proceed (recollecting that night is the proper period for sleep), so to regulate its habits of taking its food and rest, as to accustom it to an uniform system, and particular hours. Children, up to two years of age, require rest during the day, and the nurse ought to endeavor to get them into the habit of taking it in the forenoon; for, if it be taken in the afternoon, it generally interferes with the night's sleep. Whether by night or day, we must carefully exclude both light and noise from the nursery; for although they may be insufficient to *arouse* the

infant, still they cause its sleep to be disturbed and unrefreshing, and, by acting upon the nervous sensibility, predispose the child to convulsions or spasmodic attacks from slight accidental causes.

It is true that, during the first month, the infant sleeps immediately on leaving the breast, and no evil consequences ensue; but it must be borne in mind, that it takes but a little at a time, and milk is at that time wisely adapted to its delicate digestion; but as the secretion becomes richer, and suited to the increasing power of those organs, it is injurious to put the child asleep immediately after a full meal, for its rest is then unquiet and disturbed, from the process of digestion being interfered with, more particularly when the nurse foolishly endeavor to force nature, by resorting to the baneful practice of rocking.

Nothing causes greater annoyance and even anxiety to the mother, than a disposition to wakefulness on the part of her infant. A healthy child should always be prepared for its rest at the usual hours; if, instead of going to sleep, it appears restless, fretful, and disinclined for its accustomed rest, it is an evident indication of some derangement of the child's general health; frequently, through ignorance, nurses, instead of attending to this warning voice of nature,—which by the sleeplessness of the infant demands appropriate relief,—endeavor to stifle it, and sometimes, to free themselves from a little temporary annoyance, administer opiates, often in the form of “carminatives,” “soothing syrups,” which induce an unrefreshing slumber, and not unfrequently a deep stupor, mistaken for sleep, while the original evil still continues to make head against the vital power. This baneful practice has not only been the ruin of many constitutions in after life, but to it, conjoined with improper diet, stimulating or unwholesome drinks, quack medicines, together with the highly erroneous practice of a frequent administration of laxatives, in infant maladies, a considerable number of diseases and even deaths are annually attributable. Every mother should not only caution her nurse against the use of opiates, but use her utmost vigilance to detect any breach of her injunctions, which should be visited with the immediate discharge of the person so offending; for she must be truly unfitted for such an important trust, who, after being warned of its injurious tendency, will persevere in a practice placing in jeopardy the life of her infant charge.

#### TREATMENT.

Amongst the homœopathic remedies which have been found the more generally useful in removing *restlessness* and *sleeplessness* in children, the subjoined deserve especial notice.

COFFEA is very efficacious when the child seems unusually lively, restless, and wakeful; but will commonly fail to answer its purpose when the nurse is in the daily habit of taking coffee as a beverage.

*Dose:* Two globules, dry, at night and morning.

OPIUM may be substituted for Coffea when the nurse is in the daily habit of taking coffee, and is *especially indicated* if the face of the child looks red.

*Dose:* As for Coffea.

CHAMOMILLA will do good when the child is tormented with flatulence, and distention of the bowels, and appears to suffer from colic, indicated by drawing up the legs, screaming, etc.

*Dose:* As for Coffea.

ACONITUM is preferable to any of the preceding, when there is general febrile heat and great restlessness.

*Dose:* Two globules, dry, on the tongue, three times each day.

#### ADDITIONAL PARTICULARS.

The reader should further consult, if necessary, the general article on "Sleeplessness," and that on "Crying, Wakefulness, and Colic of Infants," in the subsequent pages.

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### EXERCISE.

For the first six or seven months the great business of nature seems to be the proper development of the infant frame, and particularly of the respiratory, and digestive organs. During this period, also, the cartilage is gradually forming into bone, and the infant's delicate muscles are acquiring power and strength. We find, however, that consciousness is yet indistinct, and the infant evinces no anxiety to indulge in voluntary motion, the muscles of the neck and back not possessing sufficient power to support the head, or to keep the body in an erect position; for this reason, children during this period should, when carried in the arms, be kept in a reclining position, so as to avoid an undue pressure upon the spinal column; a neglect of this precaution, and a premature carrying of the infant in an upright position, is a too frequent cause of deformities of the spine, and derangement of the functions in after life.

As its powers gradually develop, the infant seems inclined to exercise them, and evinces a desire to sit upright, which we may safely indulge, taking care not to overtask its strength by keeping it sitting up during the greater part of the time it is awake. A careful attention to nature in this, as in all other cases, is the best guide.

The practice of dandling the child in an upright position, seems rather to proceed from the pleasure of indulging the feeling of parental affection, than from any benefit the child can, by any possibility, be expected to derive from it; in fact, it is highly injurious, even at a rather more advanced period, as exciting a premature involuntary exercise of the muscles, and consequent deformity. The act of respiration bringing into play a great variety of muscles, occasional crying seems sufficiently active exercise during this period.

In mild spring and summer weather the child may, under favoring circumstances, after the first fortnight has elapsed, be carried out into the air for a quarter of an hour at a time, and the period of exercise gradually increased; in fact, if the weather be fine, it can scarcely be too much in the open air. Should its birth occur in winter, advantage may be taken of a fine day, after it is a month or five weeks old, as the frame is gradually acquiring the power of generating heat; but, at the same time, *great*

*care* must be taken to prevent its catching cold; and should the child exhibit the slightest sign of being affected by the atmosphere, the practice of carrying it out of doors should be immediately discontinued, and it should be carried up and down in a well ventilated room, the nurse moving it quietly in her arms from side to side. Many children are lost through a foolish idea of *making them hardy*, by accustoming them to endure cold; this can occur only through ignorance; for nature, in very early infancy, does not possess sufficient energy of reaction to overcome the power of a sudden or long-continued chill. We may recommend an occasional gentle friction of the hand over the body and limbs, which materially assists in the promotion of the circulation of the blood, and will, in unfavorable weather, serve, in some measure, as a substitute for exercising the infant out of doors.

The practice of assisting children to walk, or of exciting them to a premature exercise of their powers, is highly reprehensible, causing, in many cases, curvature of the limbs, the bones not being yet sufficiently formed to bear the burden imposed upon them. By allowing nature to act, the infant's power will become more gradually, but at the same time more fully developed; its carriage will be more firm and erect, and its limbs straight and well formed; moreover, it will walk with greater confidence and independence by the expiration of the first year, than those who have been *taught to walk* by the assistance of the nurse, leading strings, or mechanical inventions.

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## RETARDED STRENGTH OF THE LIMBS.

### TREATMENT.

CALCAREA CARB. is, in the majority of cases, the appropriate medicine when the child continues to be feeble, and any attempt to walk, or the capability of sustaining an erect position, is unduly procrastinated.

*Dose:* Two globules every morning, the first thing, fasting for four days (unless some condition requiring other treatment should sooner arise); then pause eight days, after which repeat the course as before; then pause again for three weeks, and repeat the course once more. But if within three weeks after completion of the third course no very apparent change should have taken place, consider the following medicines.

SILICEA OR SULPHUR may be required after the previous employment of Calcarea, when the last named medicine has been productive of no very apparent improvement, more particularly if the child manifests a generally feeble or scrofulous habit, and is affected with enlargement of joints or tendency to curvature of the bones, or rickety affections.

*Dose:* Of the remedy selected, give two globules, as directed for Calcarea.



## CHAPTER XXXIV.

## DISEASES OF INFANCY.

## INFLAMMATION OF THE EYES.

## OPHTHALMIA.

New born infants and older children are subject to *Purulent Ophthalmia* or inflammation of the eyes. This disorder is always more or less serious, for, unless speedily cured the inflammation may result in ulceration and the contents of the eye-ball be discharged, causing permanent deformity as well as hopeless blindness.

The first indication of the disease is generally the eyelids becoming glued together during sleep, with redness and swelling externally.

THE CAUSES are sudden exposure to the light of day, to cold, or the glare of a lamp or fires. Many cases of inflammation of the eyes occur in babes whose mothers are affected with leucorrhœa, therefore we must conclude a discharge from the genitals of the mother is a very frequent cause of ophthalmia in newborn infants; or it is sometimes epidemic; and no doubt many children who are what is commonly called "born blind," owe their misfortune to the neglect of proper precaution, in many cases the external indications of this affection being so slight as to escape observation. For additional particulars see page 179.

## TREATMENT.

ACONITE should be administered as soon as we become aware of the existence of this evil; a few doses will generally be found sufficient to subdue this affection in all mild cases.

*Dose:* Two pills every four hours.

BELLADONNA. The eyes look very red; cannot bear the light; opening the eyes only when in a dark place. This remedy is good to alternate with Aconite.

*Dose:* As for Aconite.

SULPHUR. There are pimples, more or less over the body; the eyes seem to itch very much. This remedy should be selected when we have reason to suppose the constitution of one or both of the parents is affected. A little breast milk applied to the affected eyes of an infant often affords speedy relief.

*Dose:* Two pills repeated every twelve hours.

## HICCUP.

This affection, though in itself of slight importance, frequently causes a considerable degree of uneasiness to the young mother. It generally arises from exposure of the body, even in a warm room, to the atmospheric air, even during the operation of dressing and undressing the new born child.

Wrapping the infant warm in bed, or better still, applying it to the breast will generally lead to a cessation of the affection; should it, however, continue, the administration of a small quantity of white sugar as much as will cover the end of a teaspoon, dissolved in a teaspoonful of water will frequently effectually remove the evil.

**NUX VOMICA.** Two pills placed in the mouth of the infant will arrest the trouble if the other advice should fail.

#### ALLOPATHIC TREATMENT.

Hiccup is generally relieved by a sudden arrest of the attention, as by a reproof or a sudden expression of great surprise. Hot cloths wrung out of warm or hot water may be continually applied, or a mustard and flaxseed poultice laid over the region of the diaphragm. The common internal remedies are cold water, snow, pounded ice, or ice cream. Anodyne and antispasmodic drugs are useful in this as in other coughs. A combination of Chloral, Bromide of Potassium with or without an opiate is generally effectual. Take of Hydrate of Chloral and Bromide of Potassium and Bicarbonate of Potash one scruple, Paregoric two drams, Peppermint Water sufficient to make two ounces. Mix.

*Dose:* A teaspoon half full, to a dessertspoonful every two or three hours. Obstinate cases will require professional advice.

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#### SNUFFLES, OR COLD IN THE HEAD.

##### CORYZA.

Snuffles or cold in the head is one of the earliest and most common affections of the young infant. It consists of an inflammation of the mucous lining of the nose. The first that is known of it is, that the infant's nose is stopped up so as to hinder its breathing, hindering it in the action of sucking by not allowing the breath to pass through the nostrils, obliging the infant to release the nipple in order to breathe, causing it to become fretful and irritable.

While this state continues, it has its influence against the infant's thriving, both by hindering it from taking a sufficient amount of nourishment and by annoying the breathing of the child so as to disturb its sleep. When the nose is dry while administering a remedy, to remove the evil, relief may be obtained by oiling the nose on the outside and by using a feather or camel's hair pencil on the inside. Fresh lard, goose grease, cream, or a little breast milk will often afford grateful relief.

##### TREATMENT.

**ACONITE.** This remedy, if administered at first when there are febrile indications, will often cut short an attack of coryza.

*Dose:* Two globules every two hours.

**NUX.** The trouble is worse at night, particularly toward morning or in the morning. Through the night the nose is very dry.

*Dose:* As for Aconite.

**EUPHRASIA.** Profuse fluent discharge and acrid discharge from the eyes; the eyes are much involved.

*Dose:* As for Aconite.

**CHAMOMILLA.** Where there is watery or mucous discharge; the child is quieted by carrying it up and down the room. One cheek red the other pale.

*Dose:* As for Aconite.

**PULSATILLA** is indicated by thick green or yellow bloody matter like discharge from the nose attended with frequent sneezing. Worse towards evening.

*Dose:* As for Aconite.

### ALLOPATHIC TREATMENT.

Cold in the head generally requires but little more than maintaining an equable temperature for a few days, when it naturally subsides. It is necessary to keep the nostrils open that the child may nurse.

For this purpose the nostrils may be moistened with glycerine applied with a camels' hair pencil. Nurses are in the habit of provoking sneezing by dropping milk into the nostril, so clearing it out, and smearing the nose with Olive or Almond Oil. A very useful application when the discharge tends to continue, is Tannin fifteen grains, Fluid Extract of Belladonna twenty drops, Glycerine two drams. Mix, and apply with a camels' hair pencil two to four times a day after first cleansing the nostril with a camels' hair brush and warm water. If the discharge is offensive a solution of one or two grains of Permanganate of Potash to the ounce should be used to cleanse the nostril. In chronic cases the above mixture of Tannin may be used alternately with the dry powder or a solution of Alum, five grains to the ounce, may be employed.

If the disease depends on scrofula, the following mixture may be given: Take of Iodide of Potassium sixteen grains, Pyrophosphate of Iron ten grains, water sufficient to make a solution, Syrup of Peppermint sufficient to make two ounces. Mix.

*Dose:* A teaspoon half full, to a teaspoonful, three times a day. Or three to five drops of the syrup of the Iodide of Iron may be given.

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### CRYING AND WAKEFULNESS OF NEW BORN INFANTS.

#### COLIC.

Occasional crying of new-born children is a wise provision to bring the respiratory organs into play, and to expand the chest. When, however, the crying becomes excessive and threatens to prove injurious, we must in the first place endeavor to discover its origin, which will frequently be found in some derangement in the infant's dress, a wet diaper or tight bandage, or perhaps it may feel thirsty and would like to be refreshed by a little cold water. Care and love will easily detect the cause of the child's cries, and a good, true mother will scarce ever lose her patience at such times. Sleeplessness is often caused by similar circumstances; the children sometimes lie with their heads too high, or they are too warm, or they are sometimes affected by nursing their mother when she is in a nervous and excited condition; all these things must be considered.

## TREATMENT.

BELLADONNA will frequently be found sufficient to remove the evil, when no exciting cause or guiding symptoms of disease present themselves, and the infant is peevish and irritable, affected with incessant whimpering and wakefulness, or prolonged fits of crying. The infant's face looks somewhat flushed.

*Dose:* Two pills every three hours, until relief or change.

CHAMOMILLA is of *very great* service, when the child appears to have *gripping pain* (colic), indicated by drawing up the limbs, contortions of the body and face; or when there is a yellowish, greenish water discharge from the bowels, the child wants to be carried all the time.

*Dose:* As for Belladonna.

COFFEA CRUDA will generally prove beneficial, when the child is exceedingly wakeful and bright, may be somewhat fretful or not.

*Dose:* As for Belladonna.

ACONITE should be employed when there is in addition to the above mentioned symptoms considerable dry heat of the skin, with extreme restlessness.

*Dose:* As for Belladonna.

NUX VOMICA will usually succeed in restoring ease, when flatulent colic, accompanied with violent fits of crying, drawing up of the legs, and a *costive state* of the bowels, appears to be the cause of the disturbance.

*Dose:* As directed for Belladonna.

PULSATILLA is very suitable when the derangement arises from overloading the stomach, or improper food, and the crying, or wakefulness, is accompanied with colic, wind and diarrhœa of stools, with no two that look alike.

*Dose:* As for Belladonna.

## ALLOPATHIC TREATMENT.

Crying, when not dependent on hunger, fright, willfulness, or peevishness, is generally dependent on dyspeptic colic. These are loud and may be long.

Whimpering, moaning, painful cries, depend on inflammatory or exhausting diseases. The smothered cry depends on true or false croup. The treatment, therefore, will have reference to the causative conditions. The use of soothing syrups is not free from danger, as they contain a secret amount of Morphine, which is an unsafe drug to give to children. Simple restlessness may be relieved by two to five-grain doses of Bromide of Potassium, dissolved in syrup.

When necessary to give an anodyne, it is best to give Paregoric; the doses of which is on the printed label, suited to the age. It can be given with the Bromide of Potassium, or an equal amount of Tincture of Hyoscyamus. But rather than by any drugs, should relief be obtained by correcting whatever derangement causes the crying.



Colic may be temporarily relieved by a dose of Paregoric suited to the age, given at suitable intervals of from half an hour to longer intervals, until the pain is relieved. Warm cloths or poultices, over the abdomen, are useful. The principal treatment consists in correcting the derangement of the stomach and bowels. Irritation from unsuitable milk is a frequent cause, as is noticed at the period of menstruation during lactation; the occurrence of another pregnancy, violent mental emotions, hard, exhausting labor, errors of diet, or some other causes which render the breast milk unsuitable. These causes suggest their own change. If the amount or quality of the breast milk is insufficient, the trouble will be relieved by proper artificial feeding. An excess of acidity in the stomach, as shown by sour eructations (belchings), sour and greenish stools, scattered, sometimes, with lumps of undigested material, call for alkalies sufficient to correct these symptoms. The best is Bicarbonate of Soda, in doses of one or two grains, or teaspoonful doses of Lime Water, given often enough to correct the sourness (acidity). Two to five grain-doses of Pepsin, with an equal quantity of Bismuth may be given three or four times day.

The regulation of the diet to the exact wants of the system, is the most important part of the treatment. This will have to be accomplished somewhat by experiment. The milk for artificial, as tested by litmus paper, should be alkaline, and not used until sufficient lime water or soda is added to make it so. It should be perfectly fresh, and kept on ice to prevent any decomposition (souring), or if this is impossible, and it cannot be freshly milked each time it is used, scalding will help to keep it, and is, in this case, permissible.

The juice of lean meat may frequently be given, instead of milk, with advantage, or raw lean beef, chopped fine and ground in a mortar, and strained through a sieve, may be salted or sweetened and fed a teaspoonful at a meal. It will frequently be digested when milk will not.

In older children, the treatment will be the same for the relief of pain. If the irritating matter is not removed by a free, loose stool, a teaspoonful or a dessertspoonful of Castor Oil (mixed with an equal quantity of inodorous Glycerine, and flavored with a couple of drops of Oil of Wintergreen or Cinnamon, to make it palatable), should be given.

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## VOMITING OF MILK.

### SOUR STOMACH. FLATULENCE.

The infant, the same as the adult, is subject to attacks of indigestion, and the disorder in the one case bears a certain similarity to that in the other. Though vomiting in every case is by no means the result of indigestion, for when the stomach is simply overloaded or rather overfilled, it relieves itself of the excess by vomiting, and this act takes place with little effort and no suffering, the process of digestion still going on undisturbed.

When indigestion, colic, constipation or diarrhoea arises from improper food, in babies raised by hand—that is, from food which evidently does not agree with the child's stomach—or even from unwholesome ma-

ternal milk, we will frequently have to encounter many difficulties before we can select a suitable article of food that will agree with the delicate digestive apparatus of the babe. We should endeavor to make a good choice of food; and if, having done so, we find that the choice has been a mistake we should try again, not despairingly, but remembering always that what is one baby's food is another baby's poison.

#### TREATMENT.

**IPECAC.** There is much sickness of the stomach the more constant the nausea, the more certain will Ipecac relieve; the stools look fermented.

*Dose:* Two pills, repeated after a lapse of four hours.

**CHAMOMILLA.** The child is very irritable and fretful, must be carried all the time; distress after nursing; sleepless starting and jerking while asleep; stools smell like rotten eggs and are green, chopped, or consist of white and yellow mucus.

*Dose:* As for Ipecac.

**ARSENICUM.** The food is thrown up as soon as taken into the stomach, and passes off through the bowels undigested; the stools are offensive; much crying during and after nursing, or as soon as the child begins to take food. Emaciation and restlessness.

*Dose:* As for Ipecac.

**NUX VOM.** is indicated when vomiting of milk is attended with flatulence, constipation, uneasiness or irritability of temper.

*Dose:* As for Ipecac.

**BRYONIA.** Should be given the second dose of Nux after the lapse of four hours, if the symptoms mentioned in the last remedy have not entirely yielded to its action.

*Dose:* As for Ipecac.

#### ALLOPATHIC TREATMENT,

Flatus will be relieved by alkalies, given as above, and care regarding food.

Vomiting, except as a symptom of serious disease, and not simply a regurgitation from over-distention of the stomach, will be relieved by the same means occurring from over-distention, the infant should be given a little less of that article of food at a time. With infants at the breast, it is generally of no consequence.

#### FLATULENT; DISTENTION OF THE STOMACH AND BOWELS.

Gentle friction with the palm of the hand which has been previously warmed, will often give grateful relief. It is best to begin at the lower right side of the bowels, passing the hand gently up the right side as high as the stomach, then across and down the left side and so on. At the same time the following remedies should be employed.

**NUX VOM** should be employed at the onset for children of a spare, meagre habit, or who are more subject to a costive condition.

*Dose:* One pill every two hours.

**PULSATILLA** is to be preferred if the children are of a relaxed habit or who are subject to discharge from the eyes and eyelids; or particularly when diarrhœa is present.

*Dose:* As directed for **Nux**.

**CHAMOMILLA** should be administered four hours after the third dose of **Nux** or **Pulsatilla**, if no permanent relief should have resulted; and more especially if convulsions or diarrhœa be developed as attendant symptoms.

*Dose:* As directed for **Nux**.

**DIET.** The diet must at the same time be attended to and altered if of an indigestible nature and the suspected cause of the mischief.

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### MILK CRUST. CRUSTA LACTEA. MILK SCAB.

**DESCRIPTION AND SYMPTOMS.** This eruption occurs in children while nursing, and more commonly while teething, and appears to be much closely connected with that process. It commonly commences on the cheeks, and forehead, by the breaking out of a number of small yellowish pustules, (pimples) crowded together upon a red surface. These pustules excite great itching, and are quickly broken, discharging a viscid fluid that dries, forming greenish-yellow scabs; the scabs are frequently rubbed off but form again; fresh crops of pustules appear around the scabs which quickly extend to the scalp, and even the face. The eruption appears behind the ears, and patches will sometimes appear also, upon the neck and breast. The discharge from the pustules is caught by the hair upon the head, and forms into small irregular friable masses, which may resemble the bruised yolk of a hard boiled egg. The pustules or *achores* as the small superficial ulcers which they form upon the skin are sometimes called, have an irregular form, contain a straw-colored fluid, rest upon an inflamed base, and are succeeded by a thin brown or yellowish scab. There is much irritation, heat, and itching; the discharge is very profuse, and with so much itching that it is easily rubbed off, leaving the surface raw and excoriated. Whenever this discharge is brought in contact with the skin—in the face, where it trickles down upon the breast, where it falls, and upon the backs of the hands, violently used by the child to rub with—it proves so acrid as to produce there a fresh eruption. The same is true even of the arms of the nurse upon which the child rests its head at night. The itching and burning acridity of the eruption, and discharge are much worse at night. All external application should be voided, with the exception of a little sweet cream or olive oil, which has sometimes proved very grateful. Everything should be carefully avoided which would have a tendency to drive this eruption in, since it might result in some more serious trouble.

### TREATMENT.

**ACONITE** should always commence our treatment, when we find excessive restlessness and excitability produced by this affection, and when the skin around the parts is red, inflamed and itching.

*Dose:* Two pills repeated every two hours.

**VIOLA TRICOLOR.** As soon as the beneficial effect has resulted from

the administration of Aconite; and six hours after the last dose of that medicine, it will be well to proceed with the remedy under consideration, which, in the simple and uncomplicated form of the disease, is often sufficient to effect a cure.

*Dose:* Two globules every night and morning.

**CALCAREA.** Eruptions, with thick scabs and yellow pus underneath. Stools having a chalky appearance. Sometimes the eruption appears in the form of a ring-worm.

*Dose:* Two globules every morning.

**GRAPHITES** should be given when a transparent, glutinous fluid exudes, which causes the crusts to fall off; the eruption appears more particularly on the chin and behind the ears; emits a fetid odor, and itches intolerably.

*Dose:* As directed for *Viola Tricolor*.

**ARSENICUM** is indicated when the eruption is very dry and scaly and causes destruction of the hair.

*Dose:* As directed for *Viola Tricolor*.

**RHUS TOX** when the scalp is considerably affected; thick scales; a bright edge of inflammation surrounds every portion of the eruption and there is much itching, particularly at night.

*Dose:* As for *Viola Tricolor*.

**SULPHUR** when the eruption extends more or less over the whole body, with much itching; although the main affection appears on the head.

*Dose:* As directed for *Calcarea*.

**SEPIA.** Eruption very moist; almost constantly discharging pus-like matter. The child often jerks its head to and fro, seemingly from the itching.

*Dose:* Two pills every evening.

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## APHTHÆ.

### THRUSH.

The thrush often attacks the infant in the second week, and is characterized by the mouth and tongue being covered with minute whitish blisters, which are rubbed off by the action of sucking. A succession of these vesicles is constantly taking place as long as the disease lasts, and if not checked, becomes confluent and sometimes present an ulcerated appearance or form a thin, white crust which generally lines the whole cavity of the mouth, and in severe cases, extends to the throat and even throughout the stomach and bowels.

The affection, although of itself neither malignant nor dangerous, frequently causes not only considerable suffering to the child by preventing it from suckling, but great pain and inconvenience to the mother by being communicated to the nipples and causing excoriations, etc.



## TREATMENT.

**CHAMOMILLA.** When the child exhibits much uneasiness and must be carried all the time, this remedy will prove more beneficial.

*Dose:* Two pills every three hours.

**MERCURIUS** is to be recommended when there is more than usual moisture in the mouth. There is inflammation in the whole cavity of the mouth; the gums have ulcers on them.

*Dose:* Two pills to be taken every four hours.

**CARBO VEG.** The mouth is very hot, the tongue almost immovable, and a sort of bloody saliva escapes occasionally.

*Dose:* The same as for Mercurius.

**SULPHUR.** The child does not take its usually long sleep; it awakens often and the same symptoms prevail, even after taking the other remedies.

*Dose:* As for Mercurius.

**BRYONIA.** The mouth seems unusually dry with thirst; dry lips, rough and cracked; the child does not like to take hold of the breast, but when once in its mouth and moistened, and it is fairly at work, it nurses well.

*Dose:* The same as for Chamomilla.

## EXTERNAL APPLICATIONS.

The mouth should be carefully washed after nursing with a soft old linen rag dipped in tepid water or in water containing a small quantity of Borax and Honey in solution. Pure molasses applied by means of a piece of old linen or muslin or by the finger, constitutes one of the best healing washes where one seems to be needed.

## ALLOPATHIC TREATMENT.

**THRUSH:** A good digestion and regularity of the bowels, should be secured. The nourishment of the child is generally insufficient, so that in cases of weakly infants, additional feeding is necessary. A little new creamy milk, the juice of lean meat or freely ground lean beef may be given. For local use, a wash of lime water, a solution of Chlorate of Potash or Borax is appropriate.

If ulceration occurs, the popular Golden Thread tea and Borax may be used. Sulphurous Acid two drams in an ounce of water, may be applied with a linen mop. Other remedies are given on page 216, in the treatment of Stomatitis.

## CONSTIPATION.

Even very young infants are sometimes affected with constipation; in fact, during the first two months of infantile life, constipation is frequent, while diarrhoea is comparatively rare. This may be occasioned by some hereditary predisposition, and be maintained by the constantly imparted influence of a costive habit on the part of the nursing mother.

In the medical treatment of the constipation of infants, recourse must

always be had to the cause. If this be found in the nursing mother, the proper remedies should first be administered to her. Should there be anything in her diet which may be capable of rendering either her or her child constipated, this should also be attended to. With scarcely a single exception, cases of costiveness in nursing infants will be found dependant upon the influence of diet, hereditary and constitutional weakness and inaction of the bowels or actual derangement of the liver.

#### MECHANICAL MEASURES.

Before proceeding to enumerate the remedies, we may observe that an injection (lavement) of tepid water, or of some milk and water, may occasionally be used, if necessary to remove the obstruction of feces; or, a suppository consisting of a small strip of paper or linen, spirally twisted and lubricated with oil, may be introduced by a gentle rotary movement. If these means should fail at first, they should be repeated after the lapse of a few hours. Rubbing the stomach and bowels frequently in the course of the day with a warm hand sometimes assists the means employed. In order to overcome the constitutional tendency, it will be well to use the appropriate remedies.

#### MEDICINAL MEANS.

*NUX VOM.* when the stools are large and difficult or small, frequent and painful, with disturbed or restless sleep, frequent efforts to evacuate the stool without effect.

*Dose:* In ordinary cases give two pills morning and evening for two days, then pause two days.

*BRYONIA* is suitable if the stools are very dry, as if burnt, and of a dark color; dry lips and mouth, and there is alteration of constipation and diarrhoea. This is a good remedy to alternate with *Nux Vom.*

*Dose:* As for *Nux Vom.*, or when alternate with *Nux Vom.*, give *Bryonia* in the morning and *Nux Vom.* in the evening.

*CALCAREA CARB.* is to be preferred when the stools are of a whitish or a clay color.

*Dose:* As for *Nux Vom.*

#### ALLOPATHIC TREATMENT.

Constipation is best relieved by injections of soap and water or cold water. I have known teaspoonful doses of Olive Oil to relieve constipation in infants without being followed again by constipation. Syrup of *Rhubarb* in doses of half a teaspoonful to a teaspoonful and a half may be used. Fluid Extract of *Senna* in doses of ten to thirty drops in syrup is generally an effectual remedy in constipation. Change in the diet which will overcome costiveness is called for. To this end fruit is indicated. It may be raw or cooked.

If hard feces have lodged in the rectum (lower bowel) which the injections do not remove, they should be broken down by the finger or removed with the handle of a spoon.

In older children free exercise should be taken; in cities the systematic use of gymnastics may be useful. Cold wet packing of the abdomen

often succeeds. Exercise, cool bathing and a diet with plenty of fruit will probably relieve. The Fluid Extract of Senna may be given, and for continued use Tincture of Nux Vomica and Belladonna will establish the habit of a regular stool. Take of Tincture of Nux Vomica and Tincture of Belladonna each two drams, Syrup of Orange Peel four drams. Mix.

*Dose:* One to twenty drops once a day according to the age of the child.

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### DIARRHŒA OF INFANTS.

Infantile diarrhœa constitutes one of the most frequent, and serious of all diseases that occur in infancy and childhood. Of itself alone diarrhœa does not often prove directly fatal, but its long continuance seriously weakens the patient, and endangers the health, and it constitutes moreover a very grave complication of other forms of disease.

CAUSES of diarrhœa are various; the introduction into the stomach of inappropriate indigestible food; the deranged condition of the mother's milk induced by mental emotions, improper diet, or other causes on the part of the mother; fright, and exposure of the infant to cold; and the improper use of laxatives, etc., may be enumerated as being the most frequent exciting causes of this disorder.

It is well to notice closely as to the symptoms. A healthy infant at the breast, passes on an average from three to six motions in twenty four hours; but in some instances the evacuations are more frequent, yet without in any degree affecting the health of the child; in such cases then, there ought to be little or no interference, so long as the stools remain free from fetor, possessing merely the slightly acid smell, peculiar to unnatural indication. When, however, the stools become green, and watery, or yellow and watery, brown and frothy, as if fermented, mixed with phlegm or mucus, or consisting entirely of mucus, emit an offensive odor, and are generally preceded or accompanied by signs of suffering, it becomes necessary to have recourse to remedial aid.

### TREATMENT.

ACONITE should be employed when the skin is hot and dry; and the child is restless; stools watery and often of a dark color; after the fever has subsided the diarrhœa will usually disappear also.

*Dose:* Give two pills every hour, until the fever abates, then gradually lengthen the time.

ANTIMONIUM CRUD. When the tongue is coated white, and there is some nausea and watery discharges; sometimes there are hard lumps of feces with the water.

*Dose:* Four pills every four hours.

CHAMOMILLA is almost indispensable in bowel complaints, when the following symptoms are present: redness of the face or of one cheek, hardness and fullness of the belly, attended by severe colic; *constant crying and drawing up of its legs*, wants to be carried. Its discharges smell like rotten eggs.

*Dose:* Two pills every two hours.

ARSENICUM is suitable when there is much exhaustion and rapid emaciation; stools undigested, offensive, and painful immediately after taking nourishment; stools and vomiting at the same time.

*Dose:* The same as for Chamomilla.

BRYONIA. Diarrhœa from hot weather, or is aggravated by the return every hot spell of weather.

*Dose:* The same as for Chamomilla.

CALCAREA CARB. is particularly suitable for children who have larger heads and open fontanelles; the head perspires much so as to wet the pillow far around. Muscles soft and flabby.

*Dose:* As for Antimonium Crud.

CARBO-VEG. should be administered when Bryonia fails.

*Dose:* As for Bryonia.

PULSATILLA is suitable for diarrhœa arising from indigestion, or from a chill. The stools are very changeable, no two alike, and are usually worse at night.

*Dose:* As for Chamomilla.

IPECAC is particularly good when there is much nausea and vomiting, or almost constant nausea; the stools are frequent. This remedy is particularly indicated at the time of weaning, or when food disagrees.

*Dose:* As for Chamomilla.

MERCURIUS is characterized by the following symptoms: much pain before the stool, great relief afterwards; stools frothy, slimy, bloody or dark green, with much straining. The child's legs and thighs are cold and clammy, particularly at night.

*Dose:* As for Antimonium Crude.

BELLADONNA. When the child is very drowsy, half asleep and half awake, much moaning.

*Dose:* As for Anti. Crud.

PODOPHYLLUM should be employed when the diarrhœa is worse in the morning, stools green or watery, or which may be quite natural, only too frequent. This is particularly good when there is falling of the bowel.

*Dose:* As for Anti. Crud.

SULPHUR is particularly good for children who have delicate parents. Much redness around the anus, eruption of pimples upon the skin; or, if the child, after getting better, under other remedies, always gets worse.

*Dose:* As for Anti. Crud.

VERATRUM ALB. Much exhaustion after every passage, with cold sweats upon the forehead, or upon the skin in general.

*Dose:* As for Chamomilla.

#### ALLOPATHIC TREATMENT.

For treatment of the diarrhœas of children, see Chapter XIII, p. 279.



## CHOLERA INFANTUM.

## SUMMER COMPLAINT.

This is a special form of bowel complaint, which requires special notice. This disease very often proves fatal, even under the best of treatment, since it appears usually in the latter part of the summer, when the young infant's system is already somewhat exhausted by the previous heat; when the air is impure and the weather sultry, or warm and damp, and seems to spring up as an epidemic from some atmospheric miasm which is little less than malignant. In this, the worst form of infantile diarrhœa, all the symptoms seem equal in intensity and the disease runs a very rapid course. Children under two years are most liable to attack.

Vomiting and diarrhœa form the most noticeable symptoms. The stomach is so irritable that it rejects immediately and sometimes with great violence, everything that it receives. At first the matter vomited consists of the ordinary contents of the stomach, but this does not continue long, as the malady advances the matter vomited is tinged with bile and presents a greenish hue.

The discharge from the bowels usually consists of a colorless or sometimes greenish; inodorous and watery fluid; occasionally with shreds of mucus mixed with it. The stools are usually discharged without effort—sometimes unconsciously—or are squirted out as though thrown from a syringe. Frequently there is considerable pain with straining, the infant manifesting its sufferings by a whining, plaintive cry, by restlessness and by drawing up and extending its limbs. As the disease advances vomiting becomes spontaneous and the matter ejected resembles that passing from the bowels, while the number of stools increase. Sometimes there is a sudden lull in the whole force of the disease or the diarrhœa may abate and the vomiting continue or the opposite. There is extreme languor and prostration and generally very rapid emaciation; which conditions, together with the vomiting and the diarrhœa as above described clearly and unmistakably point to cholera infantum.

As the disease progresses, the discharges from the bowels become still more frequent, are passed involuntarily, and are usually more profuse, resembling dark-colored dirty water or "washings of meat," and are very offensive; emaciation becomes extreme; the eyes are languid and dull, or hollow and glassy, and the child takes no notice of surrounding objects or persons; the lips are dry and shrivelled. In many cases, the child lies in an imperfect doze, with half-closed eyes, and entirely insensible to external impressions. The abdomen frequently becomes distended, and hard, or is sunken or flacid.

Frequently, in fatal cases, the child falls into a complete state of stupor, and convulsions ensue. It not unfrequently happens, particularly in children predisposed to affection of the brain, that in an early stage of the disease, the brain becomes involved, and the child dies with all the symptoms of inflammation of the brain.

FAVORABLE SYMPTOMS are: an abatement of the fever, and the

gradual restoration of an even temperature, with decreased frequency of the pulse; cessation of vomiting, and decrease in the number of evacuations, with a gradual return of the stool to a more natural condition and appearance; natural and peaceful sleep; desire for food; and a general improvement in the appearance of the child, together with a return of playfulness.

### TREATMENT.

Much of what has been said under the head of Treatment, in the preceding article on "Diarrhœa of Infants" (page 674), may be made available in selecting the remedy suited to a case of cholera infantum, and that article should be, therefore, carefully consulted. The subjoined medicines, however, are those most frequently called for in the treatment of the disease under consideration, and are approved as of the utmost efficacy when carefully selected for the individual case.

ACONITUM is very frequently indicated, and should be given, in cases in which there is febrile excitation, manifested by acceleration of the pulse, heat and dryness of the skin, and thirst. Under such circumstances it often happens that Aconitum, when promptly administered, not only removes the febrile indication, but, as well, cuts short the entire disease, and very promptly aids in restoring the babe to health.

*Dose:* Two globules dry, on the tongue, every one or two hours, according to the severity of the symptoms, until manifest improvement or change. If a favorable change should result, however slight, at once lengthen the intervals between the doses to two, three, or four hours, as the case may be, according to the existing condition, and finally cease giving medicine upon the exhibition of marked and decided amelioration and improvement. Should, however, no evidence of improvement be manifested after the sixth dose, or should symptoms indicative of some other remedy sooner occur, proceed at once to the administration of another and better indicated remedy.

ARSENICUM is suited particularly to cases in which there is great weakness from the first, so that the child does not care to hold its head up; there is much thirst, while drinking induces vomiting and stool; vomiting and purging occur at the same time, and greatly exhaust the child; the child has a pinched and distressed look, and is very restless, which restlessness, together with the other symptoms, grow worse after midnight; coldness of the hands, feet, etc.

*Dose:* In every particular as directed for Aconitum.

IPECACUANHA should be given when the stools, which are very frequent, have a fermented appearance, or resemble greenish water; and when, more particularly, nausea and vomiting predominate, the child seeming to be sick at its stomach, almost constantly.

*Dose:* In every particular as directed for Aconitum.

CHAMOMILLA will frequently prove useful in the early stages of some cases, particularly if the child be suffering from the irritation incident to dentition; it is more particularly indicated by the presence of griping,

colicky pains, with greenish stools; fretfulness and crossness, with desire to be carried.

*Dose.* Two globules dry, on the tongue, every three hours, until manifest improvement or change.

VERATRUM is required in cases in which the purging and vomiting are almost constant and simultaneous, and are excited by even the smallest quantity of nourishment or drink; motion even excites nausea; there is very great prostration, with coldness of the face and extremities, and cold sweat forming on the forehead, and an almost imperceptible pulse.

*Dose:* As directed for Aconitum.

SECALE is indicated by a chain of symptoms very similar to those pointing to Veratrum, but is more particularly indicated by paleness of the face, with sunken eyes, dry heat of the body, restlessness, and sleeplessness.

*Dose:* As directed for Aconitum.

PODOPHYLLUM should be given in cases in which the dejections have an exceedingly offensive odor, and are passed most frequently in the morning; the child moans during sleep, lying with half-closed eyes, and rolls its head from side to side.

*Dose:* In all respects as directed for Aconitum.

MERCURIUS should be given, particularly at the commencement, if there be much colicky pains, which are relieved by the purging, the stools being slimy or bloody; or, when there is a great deal of perspiration, particularly on the thighs.

*Dose:* As directed for Aconitum.

CROTON TIG. should be administered in cases in which the stool is forcibly expelled, as though forced from a syringe,—one gush and it ceases.

*Dose:* As directed for Aconitum.

BELLALONNA is required in some cases, particularly if there be great heat of surface, with flushed face, and evidences of a tendency to congestion of blood to the head; the child is very thirsty, drinks hurriedly, and thrusts its hands constantly into its mouth.

*Dose:* As for Aconitum.

CALCAREA CARB. will prove valuable in cases in which the stools are whitish and watery, and have a sour smell, as does the matter vomited; there is great emaciation, while the abdomen is bloated; the face has an old, wrinkled look; the extremities are cold. It is especially adapted to scrofulous children, with retarded dentition, or where the case has become chronic.

*Dose:* Two globules, dry on the tongue, repeated every four hours, until manifest improvement or change.

SULPHUR may be called for, in cases similar to those indicative of Calcarea. It should be given, likewise, in cases where the patient, having got better, relapses, and this process is again repeated, so that the case seems to linger, and has a tendency to become chronic.

*Dose:* As directed for Calcarea.

BRYONIA, NUX-VOMICA, may be called for in the treatment of this malady, in its earlier and later stages. For discriminative indications for their use, consult, under the heading of each medicine, respectively, the article on "Diarrhœa of Infants."

**DIET AND REGIMEN.** Very little nourishment will be taken by an infant suffering from cholera infantum. Breast-milk should constitute its chief source of food and drink, in cases in which the child suckles; but in other cases, however, great care must be taken to avoid giving anything that can add to the irritation already existing in the stomach and bowels. Pure dilute milk, boiled and sweetened, or thin, well-boiled oatmeal gruel, will afford sufficient food and drink. Water may be given in small quantities, if it does not excite vomiting; in which latter case, the infant may be permitted to suck small pieces of ice from time to time, if its lips be parched and dry, or a small piece of ice may be enclosed in a linen rag, and the child allowed to suck at it. Every effort should be made to sustain the natural warmth of the body, particularly of the abdomen and lower extremities, by the application of warmed woolen cloths; but the resort to the application of cloths wrung out of hot spirits, or claret wine, or other poultices, is highly objectionable, and should not be resorted to.

#### ALLOPATHIC TREATMENT.

In the Cholera of infants, if vomiting and purging have not emptied the stomach and bowels of their irritating contents, as shown by undigested substances in the stools or vomited matter, an emetic of three or five grains of Ipecac should be given in water, or a purge of three grains of Calomel should be given. The latter should be assisted in its operation by an injection of warm water. If no indigestible matter is noticed, neither a purge nor an emetic should be given, but no time should be lost in stopping the discharges. This is best and soonest done with Opium. One drop of Laudanum may be given with a teaspoonful of Chalk Mixture or three grains of Sub-Carbonate (or Nitrate) of Bismuth in a teaspoonful of Lime Water. This may be given every hour to a child a year old. To those younger Paregoric should be given instead of Laudanum. If neither Bismuth and Lime Water nor Chalk Mixture are at hand, the opiate should be given with a grain or two of Bicarbonate (baking) Soda.

The object is to diminish the discharges from the stomach and bowels and improve their character. When the discharges are checked or the child begins to be stupid the opiate should be discontinued or given less frequently. When the vomiting has ceased, if the bowels continue moving, if the child is not inclined to be stupid an injection of two to five drops of Laudanum may be given with half a teaspoonful of milk in a small hard rubber syringe.

If the child is nursing it should be confined wholly to the breast, and then only allowed to draw small quantities at a time. If the breast milk is rejected it can be allowed lean meat finely minced, pounded in a mortar and strained, which may be seasoned with salt. The white of eggs



mixed with water and rendered alkaline with Bicarbonate of (baking) Soda, five to ten grains, is frequently well digested. The raw meat juice and white of egg are of great use when there is great prostration or emaciation.

If the pulse weakens or collapse threatens stimulants should be freely given. Brandy or Bourbon Whisky is best suited. The dose is fifteen or twenty drops to a teaspoonful given with the milk, meat, or egg, and can be repeated at intervals varying from one to four hours. Stimulants are generally indicated early.

Rice or barley water can be drunk; small lumps of ice may be allowed.

A warm poultice over the stomach will be beneficial. Great heat of the skin will require cool sponging. If the skin is cool or cold a warm bath of 100° to 104° will be beneficial.

Sometimes Cholera infantum is caused from ill nourishment. In these cases the acute symptoms are relieved by Opium as above directed, and better nourishment completes the cure. When the disease occurs from the effects of heat Bromide of Potassium is highly serviceable and is thought by some to be generally applicable. Take of Bromide of Potash two scruples, Mucilage of Gum Arabic two ounces. Mix.

*Dose:* From fifteen drops to a teaspoonful.

Five grain doses of Cerium, an eighth of a drop of Creosote, or Carbolic Acid in water, are useful in relieving the vomiting. Continued diarrhoea will call for astringents as directed for that disease. Anæmia (thin blood) will require tonics, such as: Take of Citrate of Iron and Quinine ten to fifteen grains, Orange Water and Peppermint Water each an ounce. Mix. Give a teaspoon half full three or four times a day. If the cause of the disease is malarial, one or two grains of Quinine ought to be given at the first intermission.

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### CHAFING; EXCORIATIONS.

Excoriation, soreness, or chafing, frequently occurs in those parts of the skin of infants which are either rubbed together in the natural movements of the limbs, or liable to be fretted by friction of the diaper or other articles of clothing. Thus the groins, the surface between the genitals, and the thighs, behind the ears, under the arms, and even the folds in the neck of fleshy children, may become the seat of these excoriation.

Such tenderness of the skin is due, in the first place, in a great part, at least, to taint in the constitution; and for its complete removal will require therefore a suitable remedy. Against this affection cleanliness is the best preventive.

### TREATMENT.

CHAMOMILLA will be found speedily effective if the child cries much and requires to be carried continually up and down the room.

*Dose:* Four globules night and morning.

MERCURIUS. The excoriation is much worse at night; it is very raw and bloody; the child does not sleep much.

*Dose:* As for Chamomilla.

CALCAREA CARB. will be suitable for very fat and flabby children.

*Dose:* Two pills in the evening.

GRAPHITES will be found useful when the affected parts discharge a quantity of transparent glutinous fluid, especially behind the ears and between the thighs.

*Dose:* As for Calcarea Carb.

SEPIA. The skin is very delicate; the least injury tends to ulceration.

*Dose:* As for Calcarea Carb.

SULPHUR. There is much itching of the skin in general and of the parts affected.

*Dose:* As for Calcarea Carb.

A most valuable application to the excoriated parts of infants is to take green tea and pulverize it to a fine powder and apply the same as any powder.

#### ALLOPATHIC TREATMENT.

Protecting the chafed or excoriated skin from irritation, will provide for its cure. If the trouble is caused by the discharges from the bowels or bladder, the napkin should be immediately removed and the child cleaned. These discharges must be rendered unirritating by giving Bicarbonate of Soda, in doses of one or two grains, sufficiently often to accomplish the result.

The raw surface on the skin may be dusted by starch, flour, Oxide of Zinc or Calomel, or the Benzoated Oxide of Zinc Ointment, may be applied.

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#### ASTHMA MILLARIS.

Attacks children between two and eight (seldom infants at the breast or full grown persons), is very similar to Croup. The attack almost always sets in in winter, in consequence of a cold; first at night, suddenly without any distinct premonitory symptoms, and sets in at once with the most violent symptoms of suffocation without any rattling or wheezing.

The pulse is hurried and small. If cough sets in it is short, rough, without gagging or expectoration; the voice is hoarse, deglutition, difficult. However, the child does not complain of a local obstacle in swallowing or breathing or of pain in the larynx or trachea, but of a dull pain or spasmodic drawing throughout the chest, as if caused by suffocating vapors. Slight spasms and change of color are noticed. A general erythema of the circulation and nervous system, scanty and pale urine having a sweetish odor. The patient is suddenly roused with a fearful look and an expression of anxiety in the altered features. The voice is

deep, barking, hollow sounding, husky, very seldom wheezing or crowing. During the convulsive movements of the chest the labored inspirations of the chest are suddenly followed by a noisy expulsion of the air. The face becomes dark-colored, the eye becomes staring and protruded, the veins of the neck and temples swell. If the attack does not destroy life it ends in a few hours with sneezing, eructations and vomiting. The breathing becomes easier, the peculiar sound disappears and amid a general subsidence of the symptoms the child falls into a quiet slumber from which it awakes exhausted and desponding. Generally a second attack sets in the following night, more violent than the former with increasing fever. The danger of suffocation is greater, the face and lips become mottled blue, the shoulders are raised, and all the muscles of the thorax are violently worked. The face becomes more and more distorted, the nostrils dilate, the pulse becomes very rapid and intermits; the patient tosses about, is covered with cold or lukewarm perspiration, feces and urine are passed involuntarily, but the consciousness is undisturbed; finally the patient dies of suffocation amid convulsions. Only a few children survive more than one attack and death almost always sets in during the third or fourth attack.

The attacks never terminate with expectoration.

Asthma Millaris cannot well be confounded with croup, if we remember that in croup the larynx is always tender to pressure, and that the patients bore their heads into the pillow, whereas in this disease the child sits erect and does not complain of pain in the larynx, but of spasmodic constriction of the chest. In croup the breathing is fine and crowing; in asthma millaris it is deep and hollow.

If the disease is speedily recognized subsequent attacks may be averted and the present attack modified and alleviated by one of the following remedies.

#### TREATMENT.

**IPECACUANHA.** Sudden paroxysms of suffocation at night with a sensation of violent constriction in the chest, short and anxious inspirations and sudden and jerking expirations, pale, bloated face with blue margins around the eyes; peevish mood.

**SANBUCUS NIGRA.** Sudden starting up from sleep with a shriek, anxiety and trembling, sudden, wheezing inspirations which sometimes intermit, deep, hollow rough voice, bluish puffiness of the face and hands protruded eyeballs with the mouth half open. Anxious tossing about; heat without thirst, hurried and tremulous pulse, torpor and copious, mostly cold, sweat.

On comparing these indications with the symptoms of the disease, it is readily seen that Ipecac is only given to advantage in the beginning of the attack, and if the attack attains to its full development Sambucus has to be given. If the attack should set in again during the night following, nothing can be expected of this agent, and it will be advisable to give Arsenicum. All these remedies have to be given in the form of a watery solution—a dose every five or ten minutes.

Other varieties of Asthma can be most frequently controlled by Arsenicum.

For Asthma caused by the inhalation of sulphur, we give Pulsatilla.

Asthma, caused by a fit of anger, or a cold, can be best relieved by Chamom. or Nux-vom. the latter being more particularly indicated by a vehement disposition.

For Asthma caused by the inhalation of stone dust, in the case of stone-cutters, sculptors, etc., we give Calc. Carb., Silic. or Sulphur.

CALC. CARB. is a main remedy for chronic Asthmatic complaints, with disposition to draw a long breath, and sensation as if the breath were arrested between the shoulder blades. The distress is relieved by raising the shoulders. Mere stooping causes the breath to give out frequent paroxysms of dry cough, at night especially.

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### SWELLING OF THE BREASTS.

These organs in infants—more especially female infants—sometimes become swollen and hard, which is often the result of the absurd and wicked practice on the part of nurses, of squeezing them, under the erroneous opinion that if the milk is not squeezed out of them, they will not perform their proper functions in after life. This practice is a cruel one, and very often brings about the state of affairs it is intended to prevent, for by squeezing the gland inflammation, swelling, and perhaps suppuration and destruction follow and the breast is rendered useless and the source of a great deal of trouble and suffering in after life.

#### TREATMENT.

ACONITE should be given; if there be much fever at the outset this remedy may dispel the whole difficulty.

*Dose:* Two pills every six hours.

ARNICA. The breasts are merely hard with no apparent inflammation, or if the redness has not appeared.

*Dose:* The same as Aconite.

BELLADONNA if the breasts are very red and run in streaks to the adjoining parts.

*Dose:* As for Aconite.

BRYONIA when the breasts are quite hard and of a pale red color.

*Dose:* As for Aconite.

CHAMOMILLA. The child is very fretful; the breasts are very tender to the touch.

*Dose:* As for Aconite.

HEPAR SUL will be useful if the matter or pus has already formed.

*Dose:* As for Aconite.

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### ATROPHY--EMACIATION--MARASMUS.

GENERAL CAUSES. Emaciation of Infants and children usually arise from a predisposing constitutional cause, which frequently becomes de-



veloped during the irritation of teething, or is called into activity by inappropriate or unhealthy nourishment, either from the breast, or in the form of supplementary diet, at an earlier period; or again, and, unfortunately, not unusually, it is engendered or developed, and rendered more complicated, and almost incurable, at a somewhat more advanced age, by the pernicious habit of a free and reiterated use of mercurial preparations, in the vain hope of bringing about a healthy state of the primary organs of digestion, when these have become deranged by repeated infractions of appropriate rules, as to diet and general habits. The manifestation of worms, and the usual attendant symptoms of invagination, and the enlargement and induration of the mesenteric glands, are frequent, antecedent, occasional causes of the disease.

#### TREATMENT.

SULPHUR is appropriate in almost all cases at the commencement of the treatment, when the disease has become fairly developed, or occurs in serofulous children, but is more especially indicated by the following symptoms: *Craving appetite* for food and drink, watches eagerly for the cup or spoon, and clutches at them, thrusting everything into its mouth; enlargement of the glands in the groin or armpits; slimy, excoriating diarrhœa, or obstinate constipation; pale complexion, sunken eyes; jumping, starting, and screaming; restless sleep.

*Dose:* Three globules every morning, the first thing, for ten days, unless decided change or new symptoms should sooner occur; then pause five days, after which the course may, if still indicated, be repeated as before, and so on, until decided amelioration or change.

CALCAREA should either be employed at the onset, or after the previous administration of Sulphur (as just directed), if the following symptoms be more especially predominant, or should supervene; or if, again, Sulphur should not have been productive of apparent improvement within eight days after the completion of the second course. The indicative symptoms are: great emaciation, with craving appetite; enlargement and induration of the mesenteric glands and of the belly; great weakness, clayey evacuations, a dry and flabby skin; too great a susceptibility of the nervous system; large, open fontanels; profuse sweat about the head; cough with rattling of mucus.

*Dose:* Three globules, as directed for Sulphur.

CHAMOMILLA is chiefly required when the following symptoms occur: Frequent screaming, with drawing of the legs towards the stomach; hardness and fullness of the belly; great restlessness and feverishness; acidity; flatulence, frequent purging, the stools being of a deep grass-green, or very yellow color, or whitish, yellow and frothy, sometimes resembling beaten eggs, and of an offensive odor, often like that of rotten eggs; occasional sickness, the matter vomited being more or less of a bilious description; thirst; want of appetite; frequent change of complexion.

*Dose:* Three globules thrice a day.

PULSATILLA is indicated when less restlessness and peevishness prevail than under Chamomilla, and little or no thirst, with complete loss of

appetite; or, on the contrary, voracious and inappeasable hunger, with acid or other disagreeable risings; or disposition to vomiting the contents of the stomach; frequent papescent stools of a greenish, bilious description; or watery, slimy evacuations, at times of a light or whitish color; the child is always better in the open air.

*Dose:* As directed for Chamomilla.

ANTIMONIUM C. may be had recourse to, twelve hours after the last dose of the preceding remedy, if no improvement has resulted; or this remedy may be preferred, from the commencement, if the child cannot bear to be looked at, or touched by any one; or if its tongue be covered with a thick, white coating.

*Dose:* As directed for Chamomilla.

IPECACUANHA is usually a most useful medicine, when *nausea* or copious and frequent *vomiting* form more prominent features in the case than purging; or, when there is both vomiting and purging; the substance ejected from the bowels being chiefly of a greenish-yellow color, and often bearing a resemblance to matter in a state of fermentation.

*Dose:* As directed for Chamomilla.

MERCURIUS is required when the evacuations from the bowels are very frequent, but generally scanty and slimy, and usually attended with distressing straining; or greenish, sour-smelling, or fetid; also when small white ulcers make their appearance on the inner surface of the lips and cheeks, or on the tongue, etc.; when, with less flatulency, most of the symptoms mentioned under the head of Chamomilla are present; or, and more particularly, when the patient is affected with enlarged joints and glands, and distorted limbs--provided always these latter symptoms have not been induced, or at least materially aggravated by the abuse of Calomel, or other mercurial preparations, under allopathic treatment--this medicine is also of much efficacy.

*Dose:* As directed for Sulphur.

NUX VOMICA. The interposition of constipation, or alternate states of costiveness and relaxation, with fickle, variable, or entire loss of appetite; regurgitations or vomiting, flatulency, acidity, excessive irritability of temper, great feebleness, soreness of the mouth, or formation of small white, ulcerative specks or spots, are all indicative symptoms for the employment of this remedy.

*Dose:* As directed for Chamomilla.

BYRONIA. Vomiting occurs almost *immediately* after eating; constipation; the child always feels cold; the lips are dry and parched, and the mouth is dry.

*Dose:* As directed for Chamomilla.

ARSENICUM is *one of the most important remedies*; it is indicated by dryness of skin, which resembles parchment; hollow eyes; desire to drink often, but little at a time; excessive agitation and tossing, especially at night; short sleep, interrupted by jerks; colic, with relaxed stools of greenish, brownish, or blackish color, or evacuations containing indigested food; night sweats; *extreme prostration*; pale, waxy appearance.

*Dose:* As directed for Sulphur.

**BARYTA CARB.** is indicated by enlargement of the gland of the nape of the neck; tenderness of the belly, with tumefaction and induration of the abdominal glands; continual desire to sleep; great indolence, and aversion to exertion and amusement; dysenteric or loose stools, sometimes containing thread-worms.

*Dose:* As directed for Sulphur.

**ACIDUM NITRICUM** is chiefly required in cases which have been developed or exacerbated by the abuse of mercurial preparations; the bones and joints being swollen and tender, the mouth and gums more or less inflamed and sore, the mesenteric and other glands much enlarged; the bowels confined, or much relaxed, and attended with straining.

*Dose:* As directed for Sulphur

**PHOSPHORUS** is more or less useful, in cases with protracted and debilitating watery diarrhœa, and when the mesenteric glands are diseased

*Dose:* As directed for Sulphur.

**BELLADONNA** is to be preferred when the prevailing symptoms and conditions are as follows: capriciousness and obstinacy; nocturnal cough with rattling of phlegm; enlargement of the glands of the neck; unquiet sleep; precocity of intellect; (blue eyes and fair hair.)

*Dose:* As directed for Chamomilla.

**CHINA** is required for excessive emaciation; voraciousness; diarrhœa at night, or frequent, white, papescent motions, or evacuations of undigested matter; frequent perspirations, especially at night; great debility and languor; unrefreshing sleep.

*Dose:* As directed for Chamomilla.

**CHINA** is more particularly required when the patient suffers from worms; or for wetting of the bed, insatiable appetite, etc.

*Dose:* As directed for Chamomilla.

**RHUS** should be selected, when there is slimy or sanguinous diarrhœa; debility, and excessive languor, with constant desire for the recumbent posture; great restlessness; the symptoms are all aggravated after midnight.

*Dose:* As directed for Chamomilla.

**DIET AND REGIMEN.** When the disease is manifested in infants at the breast, recovery will, in many cases, take place on the substitution of a good nurse of sound constitution, or of appropriate artificial feeding—such as goat's milk, or, sometimes, *weak* broths—for the faulty nutriment which has originated the disease. But when the child is of scrofulous constitution, and glandular enlargements, etc., have become developed, the addition of regular and appropriate medicinal treatment is required. Again, when the affection has been engendered by improper food, in children who are being reared by the hand, or who are past the age of infancy, if the progress of decay is not too far advanced, and no organic disease be developed, a cure may, as in the former case, be accomplished by the correction of the main source of all the mischief. The improper food ought, therefore, to be at once withdrawn, or the quantity reduced,

if that has been too great. Goat's milk or cow's milk, which has previously been boiled and diluted (one part of water to about three of good milk), and, occasionally, chicken broth, or, to children of more advanced age, farinaceous food, generous beef tea, or mutton broth, free of fat, may be substituted for food of a more solid or indigestible nature with which the child has been dieted. Pure air and regulated exercise are also of great importance.

#### ALLOPATHIC TREATMENT.

**ATROPHY.** A full discussion of the treatment of infantile atrophy (wasting away) would require considerable space. It may briefly be said to be caused by lack of proper nourishment. If the child is at the breast the amount of breast milk is insufficient, or its quality poor, or, from accidental causes, it is absolutely harmful. In the latter case, the child should be raised by a wet nurse, which is preferable, or weaned; in the two former cases, it ought to be raised by a wet nurse, or artificially fed, in addition to the food it gets from the breast.

For artificial feeding, milk is most suitable. The milk should be daily tested with litmus paper, and if it is alkaline, *i. e.*, turns red litmus paper slightly blue, it may be sweetened a little) and diluted as further directed and given to the baby, without further preparation. If it is not alkaline, sufficient Lime Water or Bicarbonate of Soda should be added to render it so.

Previous to a month old, one-half water should be added to the milk; at a month old, only a quarter part water should be added. A little cream should be, also, added to make up for the water. After four months, milk may be given plain, except that it should be rendered alkaline if not naturally so, with Lime Water or Soda. Milk is the food for children. A child a month old should take a quart of milk a day prepared as above; but not over a quarter of a pint at a time. Cow's or goat's milk should be treated as above. If possible, the animal should be fed on grass and should have only pure water to drink and subject to no confinement.

If the child should continue to waste after being suitably fed as above directed, other foods may be given as directed in the dyspepsia of infants treated with colic.

Cod Liver Oil may also be given in doses of ten drops in the first place, gradually increased to a teaspoonful.

The tonic effect of Iron Quinine is of service. Take of Citrate of Iron and Quinine fifteen grains; Syrup of Orange Peel and Peppermint Water each an ounce. Mix.

*Dose:* From fifteen to thirty drops three times a day.

Pepsin of Lactated Pepsin in doses of two to five grains, after feeding or nursing, may be advantageous, or Liquid Pepsin (Sheffer's formula) may be tried as an aid to digestion.



## Part Fifteenth.

### CHAPTER XXXV.

#### THE REPERTORY.

This Repertory is to be used in selecting a remedy to remove some disease, or symptom of disease from the system. It can be almost as well used when you do not know any name for the trouble, as when you do, having only to learn all of the symptoms you can, both those that can be seen and those which can only be felt, and arranging each symptom on a line by itself, you proceed to find each symptom in the Repertory and then note on the slip of paper you have your symptom down on, on the same line with each symptom the abbreviated names of the remedies that appear in this full faced black type. If you do not find any of that type following your symptom, take the remedies appearing in *italics*, and if none of them, then the Roman or common type.

**Full Faced** type indicates remedies which are known to be the most certain to cure that symptom.

*Italic* type indicates remedies that are good but not so good as those in full faced type.

Roman, or common type, are used for remedies having a very general reference to the symptoms which they follow. Here is an example of a case of *scarlet fever* arranged and the remedy selected:

1. Throat (Pharynx) Redness of page, 26. .	Acon.	Apis.	Bell.	Merc.	.....
2. Throat Swelling, page 26. ....	Bell.	Bry.	Chi...	Ign...	Merc
3. Urine Red, (Scanty) page 81. ....	Can...	Bell.	Bry..	Carb...	.....
4. Palate Redness of, page 25. ....	Ars...	Bell.	.....	.....	.....
5. Headache as if Head would burst, p. 6.	Bell.	Calc.	Sil....	Spig..	.....
6. Delirium, page 2. ....	Ars...	Bell.	Bry..	Op...	.....
7. Skin Red Burning, page 122. ....	Bry..	Acon..	Bell.	Sil....	.....
8. Scarlet-Rash, page 124. ....	Acon.	Bry..	Bell.	Dule..	.....

BELLADONNA is the only remedy that appears in full faced type after every symptom and it may be relied on to cure the case *without fail*. Sometimes there will be no remedy in the full faced type after every symptom, then take the one that approaches most nearly to it, being careful to get all the symptoms down.

# I. MIND AND DISPOSITION.

CONDITION OF THE MIND AS CAUSED BY DISEASE.

## General Symptoms.

AMOROUS: *Ant. crud. Canth.*  
*Graph. Hyosc. Ign. Lyc. Nux vom.*  
*Phosph. Plat. Puls. Sil. Stram. Veratr.*  
 ANXIETY, FEAR: *Aco. Arn. Ars.*  
*Aur. Bell. Bry. Calc. Carb. veget.*  
*Cham. Cocc. Graph. Hell. Ign. Lyc.*  
*Nux vom. Puls. Rhus. Sep. Stram.*  
*Sulph. Veratr.*  
 BOLDNESS: *Ign. Op. Puls.*  
 DISTRUSTFUL: *Bar. Bell. Caust.*  
*Cic. Dros. Hell. Hyosc. Lyc. Ph.*  
*ac. Puls. Sulph. ac.*  
 FITFUL MOOD: *Aur. Carb. an.*  
*Ferr. Graph. Ign. Kali. Plat. Stram.*  
*Sulph. ac. Zinc.*  
 GENTLE: *Cocc. Croc. Ign. Lycop.*  
*Puls. Sil. Sulph.*  
 GREEDY: *Ars. Lyc. Natr. c. Puls.*  
*Sep.*  
 HAUGHTY: *Lycop. Plat. Stram.*  
*Veratr.*  
 HOPELESS: *Ars. Aur. Calc. Caust.*  
*Cham. Con. Graph. Ign. Lyc. Puls.*  
*Rhus. Sulph.*  
 INDIFFERENT: *Chin. Cocc. Con.*  
*Ign. Natr. mur. Phos. Ph. ac. Puls.*  
*Sep.*  
 IRRITABLE MOOD: *Acon. Anr.*  
*Bell. Bry. Cham. Coff. Ign. N. mur.*  
*N. vom. Phosph. Puls. Sep. Sulph.*  
*Veratr.*  
 JOCOSE MOOD: *Aur. Bell. Cann.*  
*Carb. an. Coff. Croc. Hyosc. Natr. c.*  
*Op. Phosph. Plat. Puls. Stram.*  
*Veratr. Zinc.*  
 PEEVISH: *Alum. Aur. Calc. Caust.*  
*Cham. Con. Ign. Lyc. Merc. Natr. c.*  
*Nitr. ac. Phosph. Plat. Puls. Sil.*  
*Sulph.*  
 SAD: *Acon. Bellad. Cham. Graph.*  
*Ign. Lyc. Natr. m. Plat. Puls.*  
*Rhus.*

SERIOUS MOOD: *Cocc. Led.*  
*Sulph. ac. Thuja.*

## Cloudiness.

CLOUDINESS: *Bell. Bry. Cann.*  
*Canth. Caps. Chin. Cocc. Carb.*  
*veg. Caust. Hyosc. Ign. Ipec. Kali.*  
*N. vom. Op. Veratr.*  
 CONFUSION: *Ant. cr. Ars. Bell.*  
*Bryon. Canth. China. Euphr. Ferr.*  
*Ign. Kali. Natr. carb. Nux vom.*  
*Phosph. Ph. ac. Puls. Rhus. Sec.*  
*corn. Spig. Staph. Zinc.*  
 DIZZINESS: *Acon. Alum. Anac.*  
*Ars. Aur. Bell. Bry. Calc. Carb.*  
*veg. Caust. China. Coloc. Con.*  
*Graph. Lyc. Natr. mur. Nitr. ac. N.*  
*vom. Op. Phosph. Phos. ac. Puls.*  
*Sep. Sil. Sulph. Veratr.*  
 DULLNESS: *Acon. Calc. Canth.*  
*Hyosc. Petr. Sep. Stram. Sulph.*  
*Zinc.*  
 INTOXICATION: *Agaric. Antim.*  
*crud. Arg. Ars. Asar. Aur. Bell.*  
*Bry. Camph. Caps. Caust. Cham.*  
*Cic. Cocc. Coff. Con. Croc. Ferr.*  
*Graph. Hyosc. Ign. Ipec. Led. N.*  
*vom. Ph. ac. Op. Puls. Rhus. Sec.*  
*corn. Sil. Stram. Veratr.*  
 LOSS OF CONSCIOUSNESS:  
*Ars. Bell. Calc. Canth. Hyosc.*  
*Nitr. ac. N. vom. Ph. ac. Rhus.*  
*Stram. Veratr.*  
 STUPEFACTION: *Acon. Ars. Asa*  
*Bell. Bry. Calc. Camph. Caps.*  
*Caust. Cham. Coff. Con. Cupr.*  
*Dulc. Ferr. Graph. Lyc. Hell. Hy-*  
*osc. Ipec. N. vom. Opium. Phosph.*  
*Ph. ac. Rhus. Sepia. Stram. Sulph.*  
 VANISHING OF SENSES: *Ars.*  
*Bell. Calc. Camph. Cic. Cupr.*  
*Graph. Hyosc. N. vom. Stram.*  
 VERTIGO: *Ars. Bell. Bry. Camph.*  
*Cann. Caps. Cham. Chin. Op. Ph.*

*ac. Puls. Rhus. Sep. Sec. corn. Sil. Spong. Sulph. Veratr.*

### Mental Weaknesses.

**ABSENCE OF MIND:** *Anac. Arn.*

*Bell. Caust. Cupr. Hell. Hep. Hyosc. Ign. Lyc. Merc. Natr. mur. Op. Ph. ac. Rhus. Sep.*

**AVARICE:** *Puls.*

**COMPREHENSION, ready:** *Coff.*

*Op. Valer.*

—heavy: *Ambra. Camph. Cham.*

*Con. Lyc. Nitr. ac. Op. Ph. ac. Zinc.*

**DELIRIUM:** *Ars. Aur. Bell. Bry.*

*Camphora. Canth. Cham. Cina.*

*Con. Cupr. Dulc. Hyosc. Op.*

*Phosph. Phosph. ac. Plat. Rhus.*

*Sec. cor. Stram. Sulph. Veratr.*

—with frightful specters: *Bell.*

—nocturnal, raving about the day's business: *Bry.*

—without consciousness: *Hyosc. Puls.*

—loquacious, with open eyes: *Coloc. Op. Veratr.*

—quiet, with stupefaction: *Ph. ac.*

—with anxiety, fear of death, over-estimation of one's self: *Plat.*

—bland, with loss of recollection: *Rhus.*

—without consciousness, often terminating in rage: *Sec. corn.*

—various, shameless, haughty: *Stram.*

—religious, haughty: *Veratr.*

—with disposition to escape: *Bry. Coc. Stram.*

**DERANGEMENT, mental:** *Bell.*

*Canth. Cupr. Hyosc. Op. Phumb.*

*Stram. Veratr.*

**EXCITEMENT of the fancy:** *Acon.*

*Ambr. Anac. Ant. Crud. Arn. Bell.*

*Chin. Coff. Hyosc. Lachesis. Op.*

*Phosph. Phosph. ac. Pulsat. Stram.*

**EXHAUSTION from mental labor:**

*Aurum. Cham. Colch. Natr. Nux*

*vom. Phosph. Puls. Sil. Spig. Spong. Staph.*

—nervous: *Aur. Bell. Calc. Dig. Iod. Natr. c. N. vom. Phosph. Sep. Staph. Sulph. Zinc.*

**FOREBODINGS:** *Acon. Spig.*

**FOREBODING of death:** *Stram. Veratr.*

**ILLUSIONS OF THE FANCY:**

*Bell. Bryon. Caust. Hell. Op. Phosph. Rhus. Staph. Stram.*

**ILLUSIONS OF SENSE:** *Bell.*

*Op. Phosph. Ph. ac. Plat. Sec. Stann. Stram.*

—slow flow of: *Cann. Chin. Ipec. N. vom. Op. Rhus. Ruta. Spig. Veratr.*

**INSENSIBILITY:** *Hell. Hyosc. Op.*

*Ph. ac. Sec. Corn. Stram.*

**INSANITY:** *Acon. Agar. Ant.*

*crud. Ars. Bell. Cann. Canth.*

*Coccul. Con. Cupr. Dulc. Hyosc.*

*Opium. Sec. corn. Stram. Sulph.*

*Veratr. Zinc.*

—with haughtiness: *Hyoscyam. Stram. Veratr.*

—mirthful: *Crocus. Ign. Stram.*

—mild: *Croc. Veratr.*

—religious: *Veratr.*

—talkative: *Stram.*

—furious: *Hyosc. Stram.*

**LAUGHTER:** *Bellad. Crocus. Hyosc. Stram. Veratr.*

**LOSS OF RECOLLECTION:**

*Acon. Alum. Anac. Arg. Arn. Bar.*

*Bell. Bry. Calc. Camph. Cannab.*

*Cham. China. Con. Cupr. Dig.*

*Hell. Hyosc. Ign. Natr. mur. N.*

*vom. Opium. Phosph. Plat. Rhus.*

*Ruta. Sep. Silicea. Stann. Staph.*

*Stram.*

**LOSS OF CONSCIOUSNESS:**

*Agar. Bell. Bryon. Canth. Cham.*

*Coc. Cupr. Hyosc. Ipec. Nux*

*vom. Op. Rhus. Stram. Verat.*

**MISTAKES IN TALKING:** *Cham.*

*Chin. Con. Croc. Ign. Lach. Lyc.*

Natr. mur. *N. vom.* Puls. Sep. Sil.  
**RAGE:** Acon. Agar. Ars. Bell.  
 Camph. Cann. *Canth.* Cham. Coc-  
 cul. Croc. *Cupr.* Drosera. Hyosc.  
*Opium.* Petr. Plumb. Ruta. Sec.  
 corn. Stram. Veratr.

**SHAMELESSNESS:** Hyosc. N.  
 vom. Op. Stram. Verat.

**WANDERING OF THE MIND:**  
 Acon. Arn. Aur. Bell. Caust.  
 Cham. Cocc. Croc. Hell. Ign. Kali.  
*Natrum mur.* Phosph. Ph. ac.  
 Plat. Sep. Stann. Sulphur. Verat.

**WEAKNESS OF MIND:** Bar. Bell.

### Defects of Memory.

**FORGETFUL:** Acon. Alum. Anac.  
 Arn. Ars. Bar. Bell. Colchic.  
 Coccul. Digit. Hell. Hyosc. Ign.  
 Laches. Lyc. Natr. mur. Petr.  
 Phosph. Plat. Rhus. Rhododend.  
 Sec. corn. Silic. Spig. Staph.  
 Stram. Sulph. Veratr. Viol. odor.

**MEMORY, involuntary:** Hyosc.

—quick: Acon. Coff. Hyoseyam.  
 Lach. Op. Viol. odor.

—defective: Acon. Anac. Arn. Bell.  
 Bryon. Calc. Camph. Cocc. Graph.  
 Hyosc. Puls. Sep. Spigel. Stram.  
 Sulph. Veratr.

—feeble: Acon. Alum. Ambr. Anac.  
 Ars. Aur. Bell. Bryon. Calc. Caust.  
 Colch. Cupr. Dig. Graph. Hep.  
 Hyosc. Ign. Lyc. Natr. mur. Op.  
 Plat. Pulsat. Rhus. Sep. Spigel.  
 Staph. Stram. Sulph. Veratr.

—loss of: Bell. Camph. Con. Hyosc.  
 Nat. mur. Op. Stram. Veratr.

**MEMORY, decrease of:** Anac. Ars.  
 Aur. Bell. Hell. Hyosc. Op. Stram.  
 Veratr.

### Mental Derangements.

**ANGER, also with vehemence:**  
 Cham.

—with fright: Acon.

—with feeling of coldness: Ars.

—with subsequent ill-humor: Bry.

—with silent grief: Ign.

—with irascible mind: *N. vom.*

—with pushing away that which one  
 holds in one's hand: Staphis.

—with mental derangement: Vera-  
 trum.

### ANXIETY AND FRIGHT.

—with joyful surprise: Coff.

—with subsequent starting during  
 sleep: Hyosc.

—followed by grief or spasms: Ign.

—followed by anxiety or nocturnal  
 pains: Merc.

—with fear, heat of the head, and  
 spasms: Op.

—followed by mental confusion:  
 Plat.

—followed by diarrhoea: Puls.

—with suffocative fits and blueish  
 face: Samb.

—with involuntary stool and icy  
 coldness: Veratr.

### GRIEF.

—caused by mortification and fol-  
 lowed by mental confusion: Bell.

—with shame and suppressed anger:  
 Ign.

—with nocturnal anxiety and com-  
 plaints: Merc.

—followed by spasms: Op.

—with emaciation, drowsiness, and  
 morning-sweats: Ph. ac.

**GRIEF, with apprehensions for the  
 future and day-drowsiness:** Staph.

### HOMESICKNESS.

—with flushed face and sleepless-  
 ness: Caps.

—with nocturnal anxiety and sweat:  
 Merc.

—with emaciation and morning-  
 sweat, drowsiness: Ph. ac.

### JEALOUSY.

—with vehemence and delirium: Hy-  
 osc.

—insane, with distrust: Lach.



## UNFORTUNATE LOVE.

- with thoughts of suicide: **Aur.**
- with jealousy and loquacity: **Hyosc.**
- with silent grief: **Ign.**
- with desponding mood: **Lach.**
- with emaciation and morning-sweat: **Ph. ac.**
- with unmerited mortification: **Staph.**

## WRATH.

- with cries, hæmoptisis, palpitation: **Arn.**
- with loss of consciousness or delirium: **Bell.**
- with flushed cheeks, thirst: **Bry.**
- hot sweat about the head, spasms: **Cham.**
- thirst, vomiting of bile, chilliness heat: **Nux vom.**
- laughter, weeping, anxiety: **Plat.**
- with internal chilliness, no thirst, but dizziness: **Puls.**
- on account of unmerited humiliation, whole body sore: **Staphis.**

## Mental Derangement.

## FOREBODINGS OF DEATH.

- with foretelling of the day of death: **Acon.**

## FOREBODINGS OF DEATH,

- with anxiety and restlessness: **Bell.**
- alternating with fits of rage: **Stram.**

## HYSTERIA AND HYPOCHONDRIA,

- with anxiety, disposition to suicide: **Aur.**
- caused by suppression of the sexual instinct: **Con.**
- with fitful mood, sleeplessness: **Ign.**
- of those who lead a sedentary life and revel at night, with constipation: **N. vom.**
- after unmerited insults, with flatulency: **Staph.**

- with tremulous and excessive sensitiveness: **Valer.**

## RAGE,

- timorous, with frightful spectra: **Bell.**
- amorous, with shameless gestures: **Canth.**
- with haughty manners and spasms: **Cupr.**
- with furious jealousy: **Hyosc.**
- with amorous tenderness and jealousy: **Lach.**
- silent, with religious melancholy: **Lyc.**
- with frightful visions, alternating with stupor: **Op.**
- censorious, with trembling and spasms: **Plat.**
- raving, with frightful spectra: **Stram.**

- w. wicked imprecations: **Veratr.**

## SUICIDE, DISPOSITION TO,

- with amorous fancies: **Ant. crud.**
- with nocturnal anguish and despair: **Ars.**

- w. religious melancholy: **Aur.**

- w. anxiety, restlessness, frightful spectra: **Bell.**

## SUICIDE, DISPOSITION TO,

- with silent anguish, fear of death: **Puls.**

- with stupefaction of the head, restlessness: **Rhus.**

## SOMNAMBULISM,

- with prediction of the day of death: **Acon.**

- with intense fancy, and dullness of feeling: **Op.**

- with clairvoyance, increased sensibility: **Phosph.**

## Vertigo.

*According to its nature.*

- GENERALLY: **Aco. Ambr. Arn. Bell. Bry. Calc. Camph. Cann. Carb. veg. Cic. Coca. Coff. Cupr. Dig. Graph. Hell. Hep. Ipec. Merc.**

- Mosch. Lye. Natr. Natr. mur.*  
*Nitr. Nitr. ac. N. vom. Op. Petr.*  
*Phosph. Ph. ac. Plat. Puls. Rhus.*  
*Sec. Corn. Spic. Staph. Stram.*  
*Stann. Sulph. Thuja. Verat. Zinc.*
- AS IF FALLING: *Acon. Arn. Ars.*  
*Cann. Cham. Cic. Con. Croc. Hep.*  
*Ign. Ipec. Nitr. ac. N. vom. Op.*  
*Puls. Sec. cor. Sil. Spig. Sulph.*  
*Staph. Stram.*
- AS IF FALLING BACKWARD:  
*Bry. Camph. Chin. N. vom. Ph. ac.*  
*Rhus. Spig. Stram.*
- AS IF FALLING SIDEWISE:  
*Arsen. Cann. Caust. Con. Euphr.*  
*N. vom. Puls. Staph. Sulph.*
- AS IF FALLING TO RIGHT  
 SIDE: *Acon. Ars. Calc. Rhus.*  
*Ruta.*
- AS IF FALLING TO LEFT  
 SIDE: *Aur. Bell. Spig. Zinc.*
- AS IF FALLING FORWARD:  
*Arn. Caus. Cic. Cupr. Ferr. Graph.*  
*Natr. mur. Petr. Ph. ac. Puls.*  
*Rhus. Sil. Spig. Sulph.*
- TURNING: *Acon. Arn. Bell. Bry.*  
*Calc. Carb. veg. Caust. Chel. Cic.*  
*Cocc. Croc. Cupr. Ferr. Merc.*  
*Mur. ac. Natr. mur. N. vom. Ph.*  
*acid. Puls. Rhod. Rhus. Sep. Sil.*
- TURNING IN A CIRCLE: *Aconit.*  
*Bell. Bry. Calc. Caustic. Cic. Con.*  
*Ferr. Hell. Kali. Merc. Nux. vom.*  
*Op. Puls. Rhus. Sep. Staph. Veratr.*
- Vertigo.  
*With accompanying ailments.*
- ANXIETY: *Ignat. Op. Rhus. Rhodod.*
- ERUCTATIONS: *N. vom.*
- EYES, gauzy before: *Laur. Sabin.*
- COLIC: *Coloc. Petr. Spig. Stram.*
- DEAFNESS: *N. vom. Puls.*
- DIM SIGHT: *Stram.*
- DIARRHŒA: *Cham. Stram.*
- CHILLINESS: *Cocce. Plum. Rhus. Veratr.*
- FAINTING: *Bar. Bryon. Canth.*  
*Chamom. Croc. Hep. Ign. Laur.*  
*N. vom. Plat. Sabad.*
- HEAT: *Acon. Arg. Bry. Croc. Ign.*  
*Laur. Led. Merc. Nux vom. Puls.*  
*Stram.*
- HEADACHE: *Aur. Bar. Calc. Con.*  
*Canth. Cupr. Ferr. Graph. Hep.*  
*Ign. Lach. N. vom. Puls. Stram.*
- NAUSEA: *Acon. Ant. crud. Arg.*  
*Arn. Bar. Bell. Bry. Chin. Coff.*  
*Calc. Coccul. Ferr. Hyosc. N. vom.*  
*Puls. Petr. Phosph. Sil. Spig.*
- NOSE, BLEEDING: *Acon. Ant.*  
*crud. Sulph.*
- OBSCURED VISION: *Acon. Arg.*  
*Bell. Canth. Cham. Cic. Croc.*  
*Dulc. Ferr. Hyosc. N. vom. Natr.*  
*mur. Nit. ac. Op. Puls. Phosphor.*  
*Merc. Sec. cornut. Stram. Sulph.*
- PALE FACE: *Puls.*
- SWEAT: *Rhus.*  
 —cold: *Ign. Veratr.*
- VOMITING: *Calc. Graph. Hyosc.*
- YAWNING: *Agar. Petr.*

## II. HEAD.

### Internal.

- MENINGITIS: *Acon. Arn. Bell.*  
*Bry. Camph. Canth. Crotal. Cupr.*  
*Glonoin. Hell. Hyos. Laches.*
- Mercur. Op. Phosph. Stram. (See general Index).*
- CONCUSSION OF BRAIN: *Arn.*  
*Bell. Cic. Merc. Ph. ac. Sep.*

## HYDROCEPHALUS.

—acute: *Acon. Bell. Bry. Hell. Mere. Op. Sulph.*

—chronic: *Ars. Hell. Sulph.*

## HEADACHE.

*Sensations* as if the brain were distended: *Bell. Caps.*

—like a band around the head: *Acon. Carb. veg. Mercur. Nitr. ac. Plat. Spig. Sulph.*

BEATING: *Aco. Ars. Asar. Aur. Bell. Bryon. Calc. Caps. Carb. veget. Caust. Cham. Cocc. Hyosc. Ign. Ipec. Lycopod. Nitr. ac. Phosph. Puls. Rhus. Sep. Silic. Sulph. Veratr.*

—as if the brain were moved: *Acon. Ars. Bell. Bry. Croc. Kali. Rheum. Spig.*

—rush of blood: *Acon. Ambr. Ant. crud. Arn. Asa f. Bar. Bell. Bry. Camph. Cann. Canth. Chin. Coff. Calc. Carb. veg. Caust. Coloc. Dig. Ferr. Graph. Hell. Hyosc. Ign. Iod. Kali. Lach. Lye. Mere. Natr. Nitr. ac. Nux vom. Op. Plumb. Pulsat. Phosph. Rhus. Sep. Sil. Sulph. Spong. Staph. Stram. Thuja. Valer. Veratr.*

—boring: *Ant. crud. Bell. Arg. Calc. Cocc. Chin. Dule. Hepar. Ipec. Ign. Plat. Staph. Phosph. ac. Rhodod. Sep. Sil. Spig. Stram. Sulph.*

—as if bruised: *Acon. Ars. Aur. Camph. Cham. Chin. Coff. Euphr. Hell. Ignat. Ipec. Phosph. Nux vom. Puls. Rhus. Sep. Veratr.*

—as if it would burst: *Ant. crud. Asar. Bar. Bellad. Calc. Caps. Cham. Chin. Coff. Con. Ign. Natr. mur. Nux vom. Phosphor. Rhus. Sep. Sil. Spig. Spong. Sulph.*

—burning: *Acon. Arn. Bell. Bry. Cupr. Hell. Ipec. Merz. Natr. N. vom. Phosph. Ph. ac. Rhus. Sec.*

corn. Spig. Staph. Stann. Veratr.

—buzzing: *Caust. Cocc. Phos. Sulph. Veratr.*

—crawling: *Aconit. Arn. Bar. Cocc. Hyosc. Puls. Rhus. Sulph. Thuja.*

—digging: *Agar. Aur. Bar. Bry. Dule. Ign. N. vom. Spig.*

—drawing: *Acon. Aur. Bell. Calc. Carb. veg. Cham. Cina. Coloc. Cupr. Dule. Graph. Hell. Lye. Ipec. N. vom. Nitr. ac. Petr. Plat. Puls. Rhus. Sep. Sil. Sulph. Veratr.*

DULL HEADACHE: *Antimon. crud. Bry. Calc. Carb. veg. Chin. Camph. Cocc. Coff. Dule. Hell. Ign. Natr. mur. Ph. ac. Plat. Puls. Veratr. Zinc.*

HEAVINESS OF HEAD: *Acon. Arn. Asa f. Agar. Alum. Ars. Bell. Bry. Camph. Cann. Cham. Chin. Cic. Coccul. Coff. Croc. Cupr. Calc. Carb. veg. Caust. Con. Digit. Dule. Dros. Euphr. Ferr. Hell. Hyosc. Ign. Ipec. Kali. Lye. Mere. Natr. mur. Nitr. acid. N. vom. Opium. Petr. Plumb. Pulsat. Phosph. Ph. ac. Plat. Sabiu. Spig. Spong. Staph. Stram. Silic. Stann. Sulph. Thuja. Veratr.*

HAMMERING: *Calc. Chin. Coff. Lach. Natr. mur. Phosph. Sil. Sulph.*

HEAT: *Aconit. Alum. Arn. Bell. Bry. Calc. Canth. Caustic. China. Coff. Dig. Dros. Dule. Euphr. Hell. Hyosc. Ign. Ipec. Lycop. Mere. Natr. mur. Nitr. ac. N. vom. Petr. Phosphor. Plumb. Puls. Rhus. Sep. Sil. Stann. Stram. Sulph.*

HEMICRANIA: *Asar. BRY. Chin. Coloc. Ign. Ipec. N. vom. Rhus. Sep.*

AS AFTER INTOXICATION:

*Bryon. Mere. Natr. mur. Puls.*

JERKS: *Ambr. Bell. Bry. Calc.*

Dig. *Mur. ac. Natr. mur. N. vom.*  
*Puls. Petr. Phos. Spic. Spong. Sep.*  
*Stann. Thuj. Valer.*

SIMPLE PAIN: *Acon. Ars. Bar.*  
*Bell. Calc. Canth. Carb. veg. Chin.*  
*Cocc. Croc. Cupr. Hell. Hyosc. Iod.*  
*Lach. Lycop. Merc. Mur. ac. Natr.*  
*c. Natr. mur. Nitr. Nux vom. Op.*  
*Ph. acid. Plumb. Puls. Rhus. Sep.*  
*Sil. Spig. Stram. Sulph. Valer.*

AS FROM A NAIL (clavus:) *Acon.*  
*Agar. Coff. Hep. Ign. N. vom. Ruta.*  
*Thuj.*

PRESSING ASUNDER: *Acon.*  
*Bar. Bell. Bry. Calc. Ign. Lye.*  
*Merc. Natr. mur. Nitr. Nux vom.*  
*Sep. Sil. Spig. Stann. Staph.*

PRESSING TOGETHER: *Alum.*  
*Asa foet. Bry. Calc. Cina. Cocc.*  
*Graph. Hell. Phosph. ac. Sil.*  
*Staph.*

PULSATING: *Bell. Bryon. Chin.*  
*Petr. Phosph. Puls. Rhus. Sulph.*

PRESSURE: *Acon. Ambr. Arg. Arn.*  
*Asa f. Asar. Anac. Ars. Aur. Bell.*  
*Bryon. Calc. Caps. Cham. Chin.*  
*Cic. Cina. Cocc. Coff. Croc. Dig.*  
*Hell. Hyosc. Iod. Ign. Ipec. Lach.*  
*Merc. Mur. ac. N. vom. Natr. carb.*  
*Natr. mur. Nitr. ac. Petr. Pulsat.*  
*Phosphor. Phosph. ac. Plat. Spig.*  
*Sep. Sil. Stann. Staph. Sulph.*  
*Valer. Zinc.*

ROARING: *Aur. Ferr. Graph.*  
*Phosph. Sulph.*

STINGING: *Acon. Ambr. Arg. Arn.*  
*Asa f. Alum. Ars. Bar. Bell. Bov.*  
*Bry. Canth. Caps. Chamom. Chin.*  
*Cic. Calc. Caust. Con. Dulc. Ferr.*  
*Hep. Ign. Ipec. Natr. mur. N. vom.*  
*Petros. Phosph. Plumb. Puls. Ph.*  
*ac. Rhus. Sabad. Selen. Staph.*  
*Sep. Sil. Sulph. Thuj.*

STUPEFYING: *Anac. Ars. Ant.*  
*crud. Arn. Bell. Bov. Cann. Cic.*  
*Cina. Calcar. Hyosc. Ign. Mur. ac.*

*Phosph. Natr. carb. Nitr. Ph. ac.*  
*Plat. Ruta. Sabad. Sepia. Stann.*  
*Staph. Verb. Zinc.*

TEARING: *Alum. Ambr. Anac.*  
*Ant. crud. Arg. Arn. Asar. Bell.*  
*Bry. Calc. Camph. Canthar. Caps.*  
*Carb. veget. Caust. Cham. Chin.*  
*Cocc. Coff. Coloc. Con. Ign. Ipec.*  
*Lycop. Mur. ac. Natr. mur. N. vom.*  
*Ph. ac. Puls. Rhus. Sil. Spig. Sulph.*

TWITCHING: *Arn. Bell. Bry. Carb.*  
*veg. Caust. Chin. Ign. N. vom. Ph.*  
*ac. Staph. Sulph.*

VIBRATING: *Lyc. Nitr. ac. Nux*  
*vom. Sil. Stann.*

### According to the Part of the Head

#### FRONT PART OF THE HEAD:

*Acon. Alum. Ambr. Anac. Antim.*  
*crud. Arg. Arn. Arsen. Asa foet. Asar.*  
*Aur. Bar. Bell. Bry. Camph. Calc.*  
*Cann. Canth. Caps. Carb. veg.*  
*Caustic Cham. Chin. Cic. Cina.*  
*Cocc. Coff. Colch. Coloc. Con. Croc.*  
*Cupr. Dig. Dros. Dulc. Euphr. Ferr.*  
*Graph. Hell. Hyosc. Ign. Iod. Ipec.*  
*Kali. Lye. Merc. Natr. mur. Nux*  
*vom. Op. Phosph. Plat. Plumb.*  
*Puls. Rhodod. Rhus. Sabin. Samb.*  
*Sep. Sil. Spig. Spong. Staph. Stann.*  
*Sulph. Veratr. Zinc.*

TEMPLES: *Acon. Agar. Alum. Ant.*  
*crud. Arg. Arn. Asa f. Asar. Bell.*  
*Bry. Calc. Camph. Cann. Canth.*  
*Caps. Chamom. Chin. Cina. Cocc.*  
*Con. Cupr. Dig. Euphr. Hell.*  
*Hep. Ign. Lach. Nitr. ac. Op.*  
*Phosph. Phos. ac. Rheitm. Rhus.*  
*Rhodod. Sabin. Spig. Spong.*  
*Stann. Staph.*

VERTEX: *Acon. Ambr. Ant. crud.*  
*Arg. Arn. Asa f. Aur. Bell. Bry.*  
*Cann. Canth. Caps. Caust. Chin.*  
*Cina. Cocc. Coff. Coloc. Con. Croc.*



- Cupr.** Ferr. Graph. Hell. Ign. Iod. Ipec. Lach. N. vom. Phosph. Ph. ac. Plat. Sabin. Samb. Sep. Sil. Spig. Spong. Stann. Staph. Stram. Sulph. Thuj. Veratrum.
- OCCIPUT:** Acon. Ambr. Arg. Arn. Asa f. Asar. Aur. Bar. Bell. Bry. Calc. Camph. Cann. Canth. Caps. Carb. veg. Chin. Cic. Coff. Colehie. Croc. Cupr. Dig. Dros. Hell. Hyosc. Ign. Ipec. Lyc. Mercur. Mosch. Nitr. Nux Vom. Op. Petr. Plat. Puls. Rhus. Sabin. Samb. Spig. Spong. Staph. Stann. Sulph. Thuj.
- RIGHT SIDE:** Acon. Alum. Ant. crud. Arg. Arn. Asa f. Bell. Bry. Camph. Canth. Canst. Chin. Cin. Coccul. Colchie. Croc. Dig. Dros. Graph. Hep. Ign. Kali. Lach. Lyc. Nux vom. Phosph. Ph. ac. Plumb. Puls. Rhus. Sabad. Sabin. Sil. Spig. Spong. Sulph. Thuj.
- LEFT SIDE:** Acon. Ambr. Ant. crud. Argent. Arn. Asa f. Asar. Aur. Bell. Bry. Calc. Camph. Cann. Caps. Carb. veg. Chin. Cic. Cin. Cocc. Coloc. Croc. Cupr. Dig. Dule. Dros. Euphorb. Ferr. Hell. Hyosc. Iod. Lach. Merc. Nitr. Nitr. ac. Nux vom. Plumb. Puls. Petr. Plat. Rhodod. Rhus. Sabin. Samb. Sec. cor. Sep. Spigel. Spong. Staph. Stann. Sulph. Veratr.
- 
- External.**
- BLOTCHES:** Ant. crud. Ars. Aur. Hep. Natr. mur. Nux vom. Phosph. Sil. Thuj.
- BLOATING:** Ars. Sulph.
- BOILS:** Bell. Rhus. Arn.
- BURNING:** Arn. Ars. Bar. Bell. Bry. Caps. Carb. veg. Coloc. Dule. Dros. Graph. Phosph. Plat. Sabad. Sil. Spig. Spong. Staph. Stann. Sulph. Veratr.
- CHILLINESS:** Bar. Calcar. Carb. veg. Dule. Kali. N. vom. Ph. acid. Spig. Staph. Veratr.
- COLDNESS:** Agaric. Alum. Bar. Calc. Phosph. Ph. ac. Rhod. Veratr.
- feeling of: Asar. Cann. Lach. Veratr.
- DRAWING:** Agar. Bar. Bell. Calc. Canth. Chin. Ignat. N. vom. Ph. ac. Puls. Rhus. Staph.
- ERUPTION:** Anac. Ars. Aur. Bar. Calc. Carb. veg. Cic. Con. Graph. Hep. Kali. Merc. Natr. mur. Petr. Rhus.
- GNAWING:** Caps. Dros. Thuj.
- HAIR FALLING OUT:** Ambr. Ant. crud. Ars. Aur. Bar. Bell. Calcar. Canth. Carb. veg. Caust. Con. Ferr. Graph. Hep. Ign. Iod. Kali. Lyc. Merc. Natr. mur. Nitr. ac. Petr. Phosph. Plumb. Sec. cor. Sep. Sil. Staph. Sulph.
- HAIR AS IF PULLED:** Acon. Alum. Arn. Bar. Bry. Canth. Kali. Lyc. Mur. ac. Nitr. Phosph. Ph. ac. Rhus.
- HERPES:** Alumina. Graph. Petr. Rhus.
- ITCHING:** Agar. Alum. Arg. Arn. Ars. Asar. Aur. Bar. Bell. Bry. Calc. Caps. Carb. veg. Caustic. Chin. Conium. Dros. Graph. Hep. Kali. Merc. Lyc. Mur. ac. Natr. mur. Petr. Phosphor. Puls. Rhod. Rhus. Ruta. Sabad. Sep. Sil. Spig. Staph. Sulph. Thuj. Veratr. Zinc.
- LICE:** Oleand. Sabad. Staph. Fine Comb.
- PAIN AS IF CONTUSED:** Arn. Ipec. Rhus. Ruta.
- PAINFULNESS:** Arsen. Bell. Calc. Caust. Hell. Merc. N. vom. Rhod. Rhus. Thuj.
- PIMPLES:** Ars. Bar. Bell. Kali. Mur. ac. Natr. c. Petr. Rhus. Sil. Zinc.

SCALES ON THE SCALP: Cal-  
car. Phosph. Rhus. **Staph.**

SCURFS: Ars. Bry. Calc. *Ferr.*  
**Graph. Hep. Lyc. Merc. Natr. mur.**  
**Petr. Rhus. Ruta. Sil. Staph.**  
**Sulph.**

AS IF THE SKIN ADHERED:  
*Arn.*

SWEAT: Bar. Bell. Bry. Calc. Cham.  
Chin. Coloc. Ipec. **Graph. Hepar.**  
Nux vom. Merc. Natr. mur. Nitr.  
ac. Op. Petr. *Phosph.* Phosph. ac.  
Plumb. Puls. *Rheum. Rhus.* Ruta.  
Sec. corn. Sep. **Silie.** Spig. Sulph.  
**Valer.**

STINGING: Agar. Alum. Ant. cr.  
Arn. Asa f. *Aur.* Bar. Bell. Canth.  
Caust. Chin. Digit. Hep. Iod. Kali.

**Natr. mur. Nitr. ac. Phosph. Phos.**  
ac. *Sabad.* Spigel. Staph. Sulph.  
Thuj. Veratr.

SWELLING: *Ars.* Bell. Cham.  
Caust. Cup. Dig. Euphorb. Op.  
Phosph. Puls. **Rhus.** Sep. Stram.  
Sulph.

TEARING: Agar. Alum. Ambr. Bar.  
*Bell. Calc.* Digit. **Graph. Lycop.**  
*Merc. Natr.* Rhus. Ruta. Sabin.  
Sep. Staph.

TENDENCY TO COLD: **Kali.**  
**Natrum mur.**

TINGLING: Acon. Arn. Arsen.  
Carb. veg. Ferr. N. vom. Rhod.  
*Sabad.* Spig.

TREMBLING OF HEAD: Cic.  
Coc. Ign.

### III. EYES.

#### Visual Power.

AMAUROSIS: Bellad. Calc. Cann.  
Chin. *Cocc.* (Con.) Dig. Dulc. *Hy-*  
*osc.* (N. vom.) *Mercur.* Nitr. ac.  
Phos. Plumb. Puls. Rhus. Ruta.  
Sec. corn. **Sil.** Spig. Stram. Sulph.  
—incipient: Aurum. China. Caust.  
Dulc. *Hyosc.* Natr. mur. Puls.  
Sulph.

BLINDNESS: *Ant. crud.* Phosph.  
Sil. Veratr.

BLURRED: Bell. Bry. China. Dros.  
**Graph.** Hyoseyam. Lycopod. Natr.  
mur. Sil. Stram.

CATARACT: Baryta. Cann. Caust.  
Conium. Euphr. Hyosc. Nitr. acid.  
Op. Puls. Ruta. Sil. Sulph.

DAZZLING: Con. Dig. Dros. Ign.  
**Kali.** Lyc. *Merc.* Nitr. ac. Ph. ac.  
Sil. Stram. Sulph.

GLAUCOMA: Phosph.

HEMERALOPIA: Bellad. Dig. Hy-  
osc. Merc. Veratr.

#### ILLUSIONS OF COLOR:

—pale: Dig.  
—blue: Bellad. Stram. Sulph. Zinc.  
—checkered: Euphorbium. Kali. Nitr.  
Sulph.

—colored streaks: Con.

—fiery yellow: Ph. ac.

—yellow: Ars. Canth. *Dig. Kali.*  
Sulph. Santon.

—gold-colored: Bell. Hyosc.

—green: *Dig.* Merc.

—red: Bell. Cann. Con. *Croc.* Dig.  
Hep. Hyosc. Spig. Stram. Sulph.

—black: Caps. Chin. *Cic. Cocc.* Merc.  
Phosph. *Staph.*

—white: Cann. Dig. Kali. Ph. ac.

—halo around the light, many-col-  
ored: Bell.

—gray: Phosph. Sep.

—green: Phosph. Sep. Zinc.

—bright: Calc.

—ruin-bold: Nitr.

—red: Bell.

—black: Phosph.

ILLUSIONS OF SIZE, SHAPE,  
DISTANCE.

- seeing double: Agar. Aur. Bell.  
Cic. Digitalis. Euphorb. Graph.  
Hyosc. Nitr. acid. Merc. Petr. Puls.  
Secale corn. Sulph. Veratr.
- seeing things half: Aur. Calc. Lye.  
Mur. ac. Natr. mur.

## VISION, false: Hyosc.

- larger: Hyosc. Staph.
- brighter: Camph. Hyosc. N. vom.
- smaller: Hyosc.
- slanting: Stram.
- confused: Stram.

OPTICAL ILLUSIONS OF  
THINGS NOT PRESENT:

- flashes: Croc. Natr. Spig.
- flashes, black: Staph.
- gray covering: Phosphor. Sil.
- threads: Con.
- feathers: Calc. Lye. Natr. Natr.  
mur. Spig.
- fire: Bar. Bell. Bry. Dig. Dulcam.  
Natr. mur. Ph. ac. Spig. Staph.  
Stram. Veratr.
- spots, dark: Calcar. Carb. veg.  
Caust. Con. Dig. Kali. Lye. Natr.  
mur. Nitr. ac. Petr. Phosph. Sec.  
corn. Sep. Sil. Sulph.
- gauze: Asa f. Alum. Ars. Aur.  
Bryonia. Caust. Cina. Croc. Drosera  
Euphorbium. Enphr. Hyosc. Ign.  
Lye. Natr. mur. Opium. Petr.  
Phosph. Plat. Rhod. Rhus. Sabin.  
Sec. corn. Sep. Stram. Sulphur.  
Thuja.
- sparks: Arsenic. Aur. Bar. Bell.  
Bry. Calcarea. Caust. Coloc. Croc.  
Dig. Dule. Kali. N. vom. Op. Petr.  
Sil. Spig. Veratr.
- cobwebs: Agar. Caust.
- figures: Camph. Samb.
- mist: Acon. Agar. Alumina. Ambr.  
Arg. Bell. Bry. Cann. Caust. Croc.  
Dig. Graph. Kali. Merc. Natr. mur.  
Ph. ac. Plat. Plumbum. Puls. Ruta.

Sec. corn. Spig. Staph. Stram.  
Sulph.

- point: Calc. Con. Dig. Kali. Merc.  
Natr. mur. Nitr. ac. N. vom. Petr.  
Phosphor. Sulph.

—halo around light: Staph.

LONG-SIGHTED: Alum. Bell. Bry.  
Calc. Caustic. Con. Dros. Hyosc.  
Lye. Natr. mur. N. vom. Petr. Sil.  
Spigelia. Sulph.

AS IF THINGS WERE MOVING:  
Bell. Con. Cic. Enphr. Hyosc. Ign.  
Merc. Sabad. Stram.

PHOTOPHOBIA: Acon. Alum. Arn.  
Ars. Bellad. Bry. Camph. Cham.  
China. Cic. Cina. Coff. Con. Croc.  
Euphras. Graph. Hell. Hep. Ign.  
Kali. Lycopod. Merc. Mur. ac.  
Nitr. ac. N. vom. Ph. ac. Puls. Sep.  
Sil. Sulph.

SQUINTING: Alumina. Bellad. Hy-  
osc. Puls. Sec. corn.

SENSITIVENESS: Acon. Antim.  
crud. Bell. Chin. Coff. Hell. Ign.  
N. vom. Spig.

SHORT-SIGHTEDNESS: Agar.  
Anac. Calcar. Carb. veg. Chin. Con.  
Enphr. Graphites. Hyosc. Natr.  
mur. Nitr. ac. Phos. Ph. ac. Plumb.  
Puls. Ruta. Stramon. Valer. Thuja.

STARING AT ONE POINT: Cien-  
ta. Cocc. Ruta. Stram.

VIBRATIONS: Arsen. Bell. Calc.  
Carb. veg. Caust. Cham. Con. Dig.  
Graph. Hell. Ign. Lye. Mur. ac.  
N. vom. Petr. Phosph. Ph. ac.  
Pulsat. Sec. corn. Sep. Staph.  
Sulph.

VISION, sudden blackness of: Acon.  
Alum. Arg. Ars. Asa fet. Atrc.  
Aur. Bell. Bry. Calc. Carb. veg.  
Caust. Canth. Caps. Cham. Cic.  
Cina. Croc. Dros. Dulcam. Ferr.  
Graph. Hepar. Hyosc. Lye. Merc.  
Natr. mur. Nitr. Nitr. ac. N. vom.  
Op. Phosph. Plumb. Puls. Sabin.

Sec. cor. Staph. Stram. Sep. Sulph.  
VISION, dim: Alum. Bellad. Cham-  
om. Chel. Rheum. Ruta. Sabad.

—pale: China. Croc. Dros. Petr. Puls.  
Rhus. Sil.

—obscured: Acon. Agar. Arn. Ars.  
Asar. Aur. Bar. Bell. Bryon. Calc.  
Camph. Caps. *Caustic*. Cham. Cic.  
Con. Cupr. Dig. Dros. Euphr. Ferr.  
Hyosc. Iod. Kali. Lyc. Natr. mur.  
Nitr. ac. Nux vom. Op. Phosphor.  
Plat. Pulsat. Ruta. Sil. Spig.  
Stram. Sulph. Thuja.

—vanishing of: Agar. Bell. Calc. Cic.  
Con. Hep. Hyosc. Mere. Natr. m.  
Nitr. N. vom. Op. Phosph. Puls.  
Sec. corn. Spig. Staph. Stram.  
Veratr.

—weak: Asar. Agaric. Alum. Ars.  
Bar. Bell. Calc. Can. Caps. Carb.  
veg. Chin. Con. Croc. Dros. Graph.  
Hep. Iod. Lyc. Hyos. Ign. Natr.  
mur. Nitr. ac. Petr. Phosph. Ph. ac.  
Plumb. Rhus. Ruta. Sec. corn.  
Sep. Sil. Staph.

### Sensations.

*In the eye-balls and eye generally.*

AGGLUTINATION: Alumina. Bell.  
Bry. Calcar. Carb. veg. Caustic.  
Croc. Euphorb. Hep. Ign. Kali.  
Lyc. Nat. mur. Nitr. ac. Nux vom.  
Phosph. Plumb. Pulsat. Rhus. Ru-  
ta. Sep. Silic. Stann. Staph. Sulph.  
Thuja.

BURNING: Acon. Agar. Alum. Ars.  
Arn. Aur. Asa f. Bar. Bell. Bry.  
Calc. Canth. Col. Con. Caps. Cham.  
Chin. Cic. Croc. Dig. Dros. Ferr.  
Graph. Hell. Ign. Kali. Lyc. Mur.  
ac. Nitr. ac. Nux vom. Phosph.  
Plumb. Pulsat. Rhod. Rhus. Ruta.  
Sep. Sil. Spigel. Spong. Staph.  
Stram. Sulph. Thuja.

CORNEA, spots on: Apis. Ars. Aur.  
Calc. Can. Chel. Con. Euphr. Hep.  
Lyc. N. vom. Sep. Sil.

—obscuration of: Ang. Cann. Caps.  
Chel. Chin. Nitr. ac. Op. Plumb.  
Puls. Sulph.

—ulcers on: Euphr. Ruta.

DRYNESS: Agar. Asa f. Asar. Bar.  
Bell. Bry. Caust. Croc. Euph. Kali.  
Lyc. Natr. mur. Nux vom. Phosph.  
Puls. Spig. Staph. Sniph. Veratr.

DISTORTION: Acon. Arnic. Ars.  
Bell. Bry. Camph. Canth. Cham.  
Cic. Cocci. Cupr. Hell. Hyosc.  
Opium. Petr. Plat. Plumb. Pulsat.  
Sec. corn. Spig. Stan. Stram.  
Sulph. Veratr.

ECCHYMOSIS: Arn. Cham. Nux  
vom. Plumb.

EYE-GUM. Agar. Alum. Calcar.  
Caust. Cham. Chin. Con. Dros.  
Euphorb. Graph. Hep. Lyc. Nitr.  
ac. Phosph. ac. Sil. Spig. Sulph.

EYES, blood flows from: Cham.  
Euphr. N. vom. Ruta.

—gum: Euphr. Ign. Puls.

FUNGUS HÆMAT: Apis. Bell.  
Calc. Lyc. Sep. Sil.

GLAZED: Bell. Cocci. Croc. Op.  
Ph. ac. Spig.

HÆMORRHAGE: Bell. Cham.  
Euphr. N. vom.

INFLAMMATION: Acon. Ambr.  
Apis. Arn. Ars. Bar. Bell. Bry.  
Calc. Camph. Canth. Carb. veg.  
Cham. Chin. Coloc. Con. Cupr.  
Dig. Dulc. Euphras. Euphorb. Ferr.  
Graph. Hep. Hyosc. Ignat. Ipec.  
Kali. Lyc. Mere. Natr. mur. Nitr.  
ac. N. vom. Opium. Phosph. Ph.  
ac. Plumb. Puls. Rhus. Sep. Sil.  
Spig. Staph. Sulph. Veratr.

LACHRYMATION: Acon. Agar.  
Alum. Ambr. Anac. Arn. Ars.  
Asar. Bar. Bell. Bry. Calc. Camph.  
Canth. Caps. Carb. veget. Caust.  
Chelid. Chin. Cina. Coff. Coloc.  
Con. Croc. Digit. Euphr. Fer.  
Graph. Hell. Hep. Ign. Kali. c.  
Lach. Lyc. Mere. Natr. mur. Nux



- vom. Op. Petr. Phosph. Ph. ac.  
 Plat. Puls. *Rhodod.* Rhus. Ruta.  
*Sabadilla.* Seneg. Sep. Sil. Spig.  
 Spong. Stan. Staph. Stram. Sulph.  
 Valer. Veratr. Zinc.
- LACHRYMATION, smarting: Acon.  
 Bell. Calc. Carb. veg. Con. Dig.  
 Euphr. Graph. Lycop. Natr. mur.  
 Phosph. ac. Rhus. Sabin. Spig.  
 Staph. Sulph.
- LOOKS, anxious: Stram.
- staring: Acon. Arn. Bryon. Camph.  
 Canth. Cie. Cina. Cocc. Cupr. Hell.  
 Hyosc. Nux vom. Op. Sec. corn.  
 Spig. Stram. Veratr.
- disturbed: Camphor. Cupr. Op.  
 Sec. corn. Stram. Veratr.
- wild: Cupr. Hyosc. Opium. Sec.  
 corn.
- MOTIONS, convulsive: Canthar.  
 Cham. Cupr. Hyosc.
- involuntary: Spig. Stram.
- PAIN, simple: Acon. Arnic. Bar.  
 Bell. Bry. Calc. Canth. Carb. veg.  
 Cin. Croc. Dig. Euphr. Petr.  
 Phosph. Plat. Plumb. Pulsat.  
 Rhus. Ruta. Sabin. Sep. Sil. Spig.  
 Stann. Staph. Veratr.
- PELLICLE ON EYES: Cann. Euphras.  
 Puls. Ruta.
- PRESSURE, outward: Acon. Asa  
 foet. Asar. Aur. Calc. Camph.  
 Cann. Canth. Con. Hell. Ign. N.  
 vom. Rhus. Spig. Staph.
- inward: Agaric. Anac. Aur. Bry.  
 Calc. Caust. Kali. Ph. acid. Spig.
- as from a foreign body: Ambr.  
 Anac. Arn. Ars. Asa f. Aur. Bar.  
 Bell. Calc. Caps. Carb. veg. Caust.  
 China. Cina. Cocc. Con. Croc.  
 Ferr. Hyosc. Ign. Merc. Natr.  
 mur. Nitr. ac. Petr. Phosph. Ph.  
 ac. Plat. Plumb. Puls. Rhus. Sep.  
 Sil. Spig. Stann.
- together: Arg. Sabin. Veratr.
- PROTRUDED: Acon. Arn. Ars.  
 Aur. Bell. Canth. Caps. Cin. Cocc.
- Con. Cupr. Hep. Hyoseyam. Op.  
 Rhus. Spigel. Spong. Staph. Stram.  
 Verat.
- PUPILS, dilated: Acon. Agar. Anac.  
 Arn. Ars. Asa f. Aur. Bell. Calc.  
 Camph. Canth. Caps. Caust. Chin.  
 Cina. Con. Croc. Cupr. Dig. Dros.  
 Hell. Hep. Hyosc. Ign. Ipec. Mur.  
 ac. Nitr. ac. Nux vom. Petr. Ph.  
 ac. Plumb. Pulsat. Sec. corn. Spig.  
 Stann. Staphys. Stram. Veratr.  
 Zinc.
- contracted: Acon. Agar. Anac.  
 Arn. Ars. Aur. Bell. Calcar.  
 Camph. Canthar. Capsic. Cham.  
 Chin. Cie. Cina. Cocc. Croc. Dig.  
 Dros. Hell. Hyosc. Ign. Mur. ac.  
 Natr. carb. Ph. ac. Plumb. Puls.  
 Sec. corn. Staph. Stram. Stann.  
 Sulph. Thuja. Veratr.
- immovable: Acon. Baryt. Bell.  
 Cham. Chin. Cupr. Dig. Ferr.  
 Hyosc. Op. Plumb. Seneg. Spig.  
 Stram.
- suddenly dilating and contracting:  
 Bar.
- PUS: Ars. Bry. Euphorb. Hep. N.  
 vom. Ruta.
- RUSH OF BLOOD TO EYES:  
 Aur. Bell. Plumb. Sep. Spig.
- SMARTING: Ambr. Agar. Alum.  
 Ars. Bell. Bry. Calc. Canth. Carb.  
 veg. Caust. Chin. Con. Croc. Droser.  
 Euphr. Graph. Hell. Hep. Kali.  
 Lye. Merc. Mur. ac. Nitr. ac. Nux  
 vom. Phosph. Ph. ac. Rhus. Sep.  
 Sil. Staph. Sulph. Thuja. Val.
- SPARKLING: Acon. Bell. Bryon.  
 Hyosc. Op. Stram.
- SPOTS ON EYES: Euphr. Nux  
 vom. Puls. Ruta.
- SQUINTING: Alum. Bell. Hyosc.  
 Puls. Sec. corn.
- SUNKEN: Ambra. Camph. Chin.  
 Cie. Cupr. Dros. Ferr. Hyosc. Op.  
 Sec. corn. Spong. Staph. Veratr.
- SWELLING: Ars. Bry. Carb. veg.

Hep. N. vom. Phosph. Plumb.  
Rhus. Ruta. Stram. Sulphur.

ULCERATION: Ambr. Arn. Calc.  
Caps. Cham. Lye. Phosphor. Sil.  
Spong. Staph. Sulph.

VEINS ENGORGED: Acon. Ambr.  
Spig.

VEINS, red: Euphr.

WHITES, blueness of: Veratr.

WHITES, yellowness of: Acon.  
Ambr. Ant. crud. Arsenic. Bell.  
Bry. Canth. Cham. Chin. Cocc. Con.  
Ferr. Ign. N. vom. Op. Phosph.  
Ph. ac. Plumb. Puls. Rhus. Sep.  
Sulph.

—without lustre: Asa f. Asar. China.  
Ferr. Hyosc. Merc. Ph. ac. Sabin.  
Veratr.

*In the eye-brows.*

DRAWING: Bell. Caust. Dros. Hell.  
Rhus.

ERUPTION: Cuprum. Kali. Selen.  
Sil. Spong. Stann. Thuj.

FALLING OF LASHES: Agaricus.  
Plumb. Selen.

ITCHING: Agar. Alum. Caust.  
China. Selen. Silic. Spigelia. Sulph.

SWELLING: Kali.

TWITCHING: Caustic. Kali. Zinc.

WARTS: Caust.

*At the eye-lids.*

(u. signifies upper, l. lower lid; r. right, l. left;  
where these signs are wanting, both lids are  
meant.)

EYE-GUM: Dros. Ferr. Rheum.  
Rhus. Staph.

AGGLUTINATION: Acon. Agar.  
Bell. Bry. Calc. Causticum. Cham.  
Con. Dig. Drosera. Euphr. Ferr.  
Graph. Ign. Kali. Mur. ac. Natrum.  
mur. Nux vom. Phosphor. Plat.  
Puls. Rhus. Sep. Silicea. Spigel.  
Staph. Stramonium. Sulph. Veratr.

BLUENESS: Dig.

BURNING: Ambr. Asar. Ars. Bell.

Bry. Caps. Con. Graphit. Kali.

Nux vom. Ph. ac. Rhus. Seneg.  
Spig. Stann.

ECCHYMOSIS: Apis. Arn.

INFLAMMATION: Aco. Apis. Ars.  
Bell. Bryonia. Calc. Carb. veg.  
Caust. Cham. Dig. Euphr. Hep.  
Hyosc. Ign. Lye. N. vom. Pulsat.  
Rhus. Sep. Spig. Spong. Staph.  
Stramonium. Sulph. Thuj. Veratr.

ITCHING: Ambr. Ars. Bellad. Bry.  
Calc. Camph. Carb. veg. Caustic.  
Cocc. Drosera. Euphorb. Euphrasia.  
Lye. Nux vom. Phosph. Rhus.  
Spong. Staph. Sulph. Veratr.

—u.: Bar. Carb. an. Cin. Croc. Sil.  
Staph.

—l.: Caust. Lach. Petr. Ruta.

PARALYSIS: Bellad. Cocc. Nitr.  
ac. Rhus. Sepiæ. Spig. Stram. Ve-  
ratr.

PIMPLES: Hep. Lye. Petr. Rhus.  
Sulph.

—u.: Hep.

—u. r.: Canth. Lye.

—u. l.: Chel.

—l.: Natr. mur. Seneg.

—l. l.: Alum.

SMARTING: Camph. Carb. veg.  
Caust. Ign. Rhus. Spig.

—u. r.: Rhus.

—u. l.: Aur.

SPASMS. Alum. Ambr. Bell. Croc.  
Hyosc. Rhododendr. Sep. Sil.

STYES: Ambr. Apis. Digit. Ferr.  
Lye. Puls. Rhus. Sep. Stann.  
Staph.

SWELLING: Aco. Arn. Ars. Bar.  
Bell. Bry. Calcareæ. Caust. Cham.  
Euphr. Ferr. Hyosc. Ign. N. vom.  
Phosphor. Pulsatilla. Rhus. Ruta.  
Sen. Spong. Stram. Sulph. Valer.  
—u.: Aco. Asar. Natr. c. Sep. Sil.  
Sulph.

—l.: Ars. Aur. Bell. Bry. Croc. Dig.  
Lach. Op. Ph. ac. Rhus. Sep.

AS IF SWOLLEN: Aconitum.  
Croc. Rhus. Valer.

TETTER: Bry. Rhus. Sep.  
 ULCERATION: *Colch.* Croc. Ign.  
 Lyc. Nux vom. Phosph. *Puls.*  
 Rhus. Silicea. **Spig. Staph.** Stram.  
 —l.: *Colch.* Natr. mur.

*In the canthi.*

(Corners of the eye)

ABSCCESS, int.: Bry.  
 AGGLUTINATION: Phosph. Staph  
 BLUEISH, int.: Aur. Sassap.  
 BURNING: Alum. Stann. Staph.  
 —int.: *Agar.* Asar. *Aur.* Bar. Bell.  
*Calc.* Graph. Hell. Natr. mur.  
*Phosph.* Ph. ac. Rhodod.  
 —ext.: Carbo anim. Cina. Kali. Sep.  
 Spig. *Stront.* Sulph.  
 EYE-GUM: *Agar.* **Ant. crud.** *Calc.*  
 Caust. Coff. Dig. Euphr. Graph.  
 Ipec. N. vom. **Staph.** Thuja.  
 —ext.: Chin. *Euphorbium.* Ipec.  
 Sabad. Staph.  
 —int.: *Agar.* Euphras. Helleb. Rhus.  
 Sil. Staph.  
 FISTULA LACHRYM: Calc. Chel.  
 Petr. Pulsatilla. Ruta. Stann.  
 Staph.

GUM: Natr. mur.  
 INFLAMMATION: *Aco.* Alum. Ars.  
 Cham. Euphr. Ign. N. vom. Phosph.  
 Puls.  
 —int.: *Agar.* Merc.  
 —ext.: *Calc.*  
 STYE: **Puls.** Sep  
 —int. r.: Natr. mur.  
 ITCHING: Arg. Arn. *Calc.* *Caust.*  
 Cina. Hell. Hyosc. *Natr. mur.* Plat.  
 Puls.  
 —int.: *Bellad.* *Caust.* Con. Lyc.  
 Nitr. ac. Nux vom. Pulsatilla. *Ruta.*  
 Sep. *Staph.*  
 LACHRYMATION: Petr. Silicea.  
 Thuja.  
 PRESSURE, as from a foreign body,  
 l.: Agar. Bar. Con. Ignat. Nitr. ac.  
 PUS: Cham. Cina. Graph. **N. vom.**  
 Puls. Staph.  
 SMARTING: *Carb. veg.* Mur. ac.  
 N. vom. Sep. Sil.  
 —int.: Con. Graph. Hell. Kali. N.  
 vom. Puls. **Staph.**  
 —ext.: Camphora. Ign. N. vom.  
 Sulph.

## IV. EARS.

### On the Ears.

BORING: Alum. **Aur.** *Baryta.* Bell.  
 Caust. Euphr. *Helleb.* Plat. Plum-  
 bum. Sil. *Spigel.* Stann.  
 DISCHARGE, of blood: Bryonia.  
 Cic. Graph. *Mercurius.* Petr.  
 Phosph.  
 —of pus: Alum. Aur. Bellad. **Bov.**  
**Calc.** *Caustic.* Kali. Lyc. **Merc.**  
 Petr. **Pulsat.** Sep. Sulph.  
 —humor: Asa fœt. Caust. Mercur.  
 Natr. mur. Phosph. Sep.  
 ERUPTION: Agar. **Bar.** Cic. Chin.  
 Kali. Petr. *Phosphor.* Pulsatilla.  
 Sep. Sil. Spongia. Sulph.

—behind the ears: Antim. crud.  
 Canth. Chin. **Puls.** Sabad. **Staph.**  
 EAR-WAX, liquid: Merc.  
 —blood-red: Con.  
 —hard: Selen. Soft water.  
 —pappy: Lach.  
 —deficient: **Calcar.** Carb. veg.  
 —increased: Agar. Calc. Con. Selen.  
 Sep. Sil.  
 HEAT: *Aco.* Alum. Ars. Asar. Bel-  
 lad. Bry. *Calc.* Cantharis. Capsic.  
 Carb. veg. Chin. Hep. Ignat. Kali.  
 Merc. Natr. mur. Petr. Ph. ac.  
 Puls. *Sabin.* Sep. Sil.  
 ITCHING: *Agar.* Alum. Ambr.

*Ant. cr. Arg. Bar. Bell. Calc. Carb. veg. Caust. Coloc. Con. Caps. Graph. Hep. Ign. Kali. Lycop. Mur. ac. Natrum mur. Nitr. ac. Nux vomica. Petr. Phosphor. Phosphor. ac. Plat. Pulsat. Rhodod. Rhus. Sambuc. Selen. Sep. Sil. Spigel. Stann. Sulph.*

ITCHING of external ear: *Arg. Spig.*

—of lobule: *Argent. Sabadilla. Veratr.*

INFLAMMATION: *Acon. Bryon. Kali. Lyc. Merc. N. vom. Ph. ac. Puls. Sil. Spong.*

PAROTID GLANDS, pains on: *Arg. Bry. Cham. Chin. Cocc. Hyosc. Ign. Merc. Phosphor. Puls. Rhus. Sabad.*

—pressure: *Merc.*

—inflammation: *Chamom. Rhus.*

—swelling: *Bar. Bell. Bry. Carb. veg. Chamom. Chin. Cocc. Con. Dule. Hyosc. Ign. Merc. Nitr. ac. Phosph. Puls. Rhus. Sepia. Sil. Sulph.*

—hardness: *Rhus.*

—painfulness: *Puls.*

—stitches: *Bell. China. Con. Ign. Nitr. ac. Pulsat. Sep. Sulph.*

STITCHES: *Alum. Ant. cr. Arn. Ars. Bar. Bell. Bry. Calc. Cann. Canth. Capsic. Carbo. veg. Caust. Chamom. China. Colch. Coloc. Con. Dros. Dule. Ferr. Graph. Hell. Hep. Ign. Ipec. Kali. Lycopod. Merc. Natr. mur. Nux vom. Petr. Platin. Plumb. Ph. ac. Puls. Rhodod. Sep. Sil. Spigel. Spong. Stann. Staph. Sulphur. Veratr. Zinc.*

SWELLING: *Ant. crud. Calcareo. Caust. Kali. Lycop. Merc. Natr. mur. Nitr. ac. Ph. ac. Puls. Rhus. Sep. Silic. Spong. Zinc.*

TEARING: *Aconit. Agar. Alum.*

*Ambr. Anac. Arn. Aur. Bar. Bellad. Camph. Cantharis. Capsic. Cham. Chin. Carbo. veg. Caust. Con. Cupr. Dros. Dulcam. Graph. Hyosc. Kali. Lyc. Merc. Mur. ac. Nitr. ac. N. vom. Plat. Plumb. Ph. ac. Pulsat. Stann. Spigelia. Sulph. Zinc.*

—behind the ears: *Alumina. Ambr. Arg. Bar. Belladonna. Canth. Caps. Plumb. Rhus. Sep. Sil.*

TENESMUS: *Ambr. Anacard. Arn. Ars. Asar. Bell. Carb. veg. Caustic. Coloc. Conium. Cham. Cina. Colch. Croc. Dros. Dule. Hell. Kali. Lyc. Merc. Mur. ac. Nitr. ac. N. vom. Phosph. Plat. Puls. Rhodod. Rhus. Sabad. Sep. Spig. Spong. Stann. Sulph. Thuja.*

ULCERS: *Alum. Camph. Kali. Merc. Puls. Ruta. Spongia. Stann.*

## Hearing.

DEAFNESS: *Ambr. Ant. crud. Arn. Plumb. Puls. Sec. corn. Veratr.*

FLUTTERING: *Bell. Cupr. Merc. Plat. Spig.*

GROANING: *Puls. Sabad.*

HÆMORRHAGE: *Bell.*

HAMMERING: *Spig.*

HARD HEARING: *Ambr. Anac. Ant. crud. Arn. Arsen. Asar. Aur. Bar. Bell. Bry. Calc. Caust. Chamom. Chin. Cic. Coccul. Croc. Dule. Dros. Graph. Hyosc. Ign. Iod. Kali. Lyc. Merc. Natr. m. Nitr. ac. Petr. Phosph. Ph. ac. Puls. Ruta. Sabad. Sec. cor. Sep. Sil. Spig. Spong. Stram. Stann. Sulph. Veratr.*

—to human speech: *Ars. Phosph.*

HUMMING: *Aur. Bell. Bryon. Caust. Con. Laches. Lycop. Natr. mur. N. vom. Puls. Sabad. Sep. Spig. Sulph.*



Illusions of Hearing.  
 ROARING: *Acon. Ambr. Ant. crud.*  
*Arn. Ars. Asar. Aur. Bell. Bryon.*  
*Calc. Cann. Carb. veg. Caust. Cic.*  
*Cocc. Colchic. Con. Graph. Ignat.*  
*Kali. Lye. Merc. Nitr. ac. N. vom.*  
*Op. Phosph. Ph. ac. Plat. Puls.*  
*Rhus. Sec. corn. Sep. Sil. Staph.*  
*Sulph. Thuja. Veratr.*  
 INTOLERANCE OF MUSIC:  
*Acon. Cham. Coff. Ign. Viol. od.*  
 REPORTS: *Graph. Kali. Natr. c.*  
*Rhus. Sabad. Sil. Staph. Zinc.*  
 RINGING: *Alum. Arsen. Calc.*  
*Clemat. Kali. Lycop. Phosph.*  
*Rhod. Sil. Sulph. Valer. Zinc.*  
 RUSHING: *Aur. Bar. Bell. Cocc.*  
*Con. Cham. Dulc. Kali. Natr. mur.*  
*Nux vom. Puls. Rhodod. Stann.*  
 RINGING: *Acon. Agaric. Anac. Arn.*  
*Ars. Asa f. Aur. Bar. Bell. Bry.*  
*Calc. Camp. Cann. Canthar. Carb.*  
*veg. Caustic. Cham. Chin. Cic.*

*Con. Dulc. Graph. Kali. Ignat.*  
*Lye. Mercur. Natr. mur. N. vom.*  
*Op. Petr. Plat. Ph. ac. Puls. Rhus.*  
*Sep. Silic. Stann. Staph. Sulph.*  
*Veratr.*  
 SENSITIVE HEARING, excessive:  
*Anac. Bell. Carb. veg. Coff. Graph.*  
*Ign. Lye. Nux vom. Phos. Ph. ac.*  
*Sep. Sulph.*  
 SENSITIVENESS TO SOUND:  
*Aco. Bell. Chin. Coff. Colch. Con.*  
*Ign. Iod. Merc. Natr. carb. Nitr.*  
*ac. N. vom. Ph. ac. Puls. Sil. Spig.*  
*Zinc.*  
 SENSITIVENESS TO MUSIC:  
*Acon. Cham. Coff. Ign.*  
 WHIZZING: *Acon. Agar. Alum.*  
*Anac. Arn. Ars. Asar. Aur. Bar.*  
*Bell. Bry. Calc. Canth. Carb. veg.*  
*Caust. Chamom. Chin. Cupr. Ferr.*  
*Hep. Kali. Lye. Merc. Natr. mur.*  
*Nux vom. Op. Petr. Phosph. Puls.*  
*Rhod. Ruta. Sec. corn. Sep. Spig.*  
*Sulph. Verat. Zinc.*

## V. NOSE.

### On the Nose.

BLACK PORES: *Nit. ac. Sulph.*  
 BLOOD BLOWN FROM THE  
 NOSE: *Agar. Alum. Ambr. Ars.*  
*Asar. Bar. Canth. Caps. Caust.*  
*Dros. Graph. Hep. Kali. Lach.*  
*Lyc. Natrum mur. Nux vom.*  
*Petr. Phosph. Phos. ac. Puls. Sep.*  
*Silic. Sulph.*  
 BOILS: *Alum. Carb. an. Arnica.*  
 BONE-PAIN: *Aur. Hyosc. Lach.*  
*Merc.*  
 CANCER: *Aur. Calcar. Sep. Sulph.*  
 COLDNESS: *Arn. Bellad. China.*  
*Dros. Ign. N. vom. Plumb. Veratr.*  
 DISCHARGE OF PUS: *Aur. Cina.*  
*Lach. Phosph. ac. Puls.*

DULL: *Anac. Calc. Caps. Carb. an.*  
*Ipec. Kali. Nux vom. Puls. Rhodod.*  
 HÆMORRHAGE: *Acon. Cann.*  
*Conium. Croc. Led. Rhus. Sabin.*  
 INFLAMMATION: *Agar. Arnica.*  
*Ars. Aur. Bellad. Cann. Canth.*  
*Lach. Merc. Natr. mur. Plumb.*  
*Rhus. Sulph.*  
 ITCHING: *Agar. Alumina. Arn.*  
*Bell. Bov. Calc. Carbo veg. Caust.*  
*Cannab. Caps. Coloc. Con. Chel.*  
*Chin. Cina. Kali. Lye. Hell. Ign.*  
*Laches. Merc. Mur. ac. Nux vom.*  
*Platina. Plumb. Phosph. Phosphor.*  
*ac. Santon. Sambuc. Selen. Seneg.*  
*Sep. Silic. Spig. Staph. Zinc.*  
 NOSE BLEED: *Aconit. Agaric.*

Alum. Ambr. Ant. crud. *Arg.* Arn.  
 Ars. Bar. Bell. Bry. Calc. Cam.  
 Canth. Caps. Carb. veg. *Causti-*  
*cum.* Cham. Chin. Cina. Coff.  
 Colch. Con. Croc. *Cupr.* Dig. Dros.  
 Dulcamara. Ferr. Graphit. Hep.  
 Hyosc. Ipec. Kali. Lach. Lycop.  
 Merc. Mosch. Natr. mur. Nitr. ac.  
 N. vom. Petr. Phos. Ph. ac. *Pulsat.*  
 Rhod. Rhms. Ruta. *Sabad.* Sabin.  
 Sambuc. *Sassap.* Secale corn.  
 Seneg. Sep. Silicea. Spong. *Stann-*  
*um.* Sulphur. Thuja. *Veratr.*

POLYPI: Teuer. mar.

SCURFS IN NOSE: Alumina. Ant.  
 crud. Arn. Aur. Bry. Canth. Cham.  
 Cic. Cocc. Hepar. Hyosc. *Ignat.*  
 Kali. Lachesis. Merc. Nux vom.  
 Ph. acid. *Puls.* Selen. Sil. *Spigelia.*  
 Staph. Thuja.

—under the nose: Bar. Kali.

#### Smell.

SMELL, of blood: Sil.

—sensitive: Acon. Aur. Bar. Bell.  
 Cham. Chin. Cocc. Colch. Graph.  
 Kali. *Lycop.* N. vom. Phosph.  
 Plumb.

—putrid: Aur. Bellad. Calc. Merc.  
 Sulph.

—fine, extremely: Acon. Agar. Aur.  
 Bell. Chin. Cocculus. Coff. Con.  
 N. vom.

—of lime: Sulph.

—of foul cheese: N. vom.

—deficient: *Anac.* Bell. Hep. Hyosc.  
 Nat. mur. Op. Plumb. *Pulsat.*  
 Ruta. Sec. corn. Sep. Sil. Zinc.

—catarrhal: Graph. Merc. Puls.  
 Sulph.

—fetid: *Belladonna.* Phosph. Sep.

SWELLING: Arn. Ars. Aur. Bell.  
 Bry. Calc. Cam. Canth. Caust.  
 Cham. Chel. Cocc. Lyc. Merc. Natr.  
 mur. Nitr. ac. Phosphor. Ph. acid.  
 Puls. Rhms. Sep. *Spigelia.* Stann.  
 Stram. Zinc.

SWELLING OF BONES: Aur.

TETTER: Rhms. *Spig.*

TWITCHING: Agar. Arnica. Aur.  
 Caps. Con. Hyoscyam. *Plat.* Puls.

ULCERATED NOSTRILS: *Anac.*  
 Ant. crud. Arn. Aur. Bell. Bryon.  
 Calc. Cham. Cocc. Graph. Hep.  
 Hyosc. *Ign.* Lach. Lyc. Merc. Natr.  
 mur. Nitric acid. N. vom. Phosph.  
 Phosph. ac. *Puls.* Sep. *Spig.* Stann.  
 Staph. Zinc.

—exter. nose: Puls.

WARTS: Caust.

## VI. FACE.

Color and External Ap-  
 pearance.

ACNE ROSACEA (red pimples):

Arsenic. Cann. C. an. *Veratr.*

—blue: Aco. Ars. Asar. Bryon.

Camph. Cham. Cic. Cina. Con.

Cupr. Dros. Hyosc. Ign. Ipecac.

Mercurius. Op. Samb. Spongia.

Stramon. *Veratr.*

—margins around eyes: *Anac.* Arsen.

Calcar. Cham. China. Cina. Cocc.  
 Cupr. Graph. Hep. *Ignat.* Ipecac.  
 Kali. Lach. Lycop. Merc. Phosph.  
 Phosph. acid. Rhms. *Sabad.* Sabin.  
 Sec. corn. Staph. Stram. Sulphur.  
*Veratr.*

—brown, changing to: Bryon. Hyosc.  
 Iod. Op. Sec. corn. *Stram.*

—bloated: Aco. Arnica. Aur. Bar.  
 Bell. Bry. Cham. China. Cina.  
 Cocc. Cupr. Dig. Dros. Dulcamara.

- Ferr. Hyosc. Ipec. Kali. Led. Lye.  
 Merc. Natr. c. Nux vom. Op.  
 Phosph. Plumbum. Rhns. Sep.  
*Spig. Spongia. Staph. Stram.*
- COMPLEXION, changing: Aco.  
 Bell. Bov. *Capsic. Cham. Chin.*  
 Cina. *Crocus. Hyosc. Ign. Led.*  
 Opium. Natr. c. Phosph. Ph. ac.  
 Veratr. Zinc.
- jaundiced: Acon. Ambr. Ant. crud.  
 Arn. Ars. Bry. Calc. *Causticum.*  
 Canth. Cham. Chel. Chin. Cina.  
 Con. Croc. Ferr. Graph. Hell. Hep.  
 Ign. Jod. Kali. Lye. Merc. Natrum.  
 mur. Nitr. ac. N. vom. Op. Petr.  
 Plumb. Puls. Rhns. Secale corn.  
 Sep. *Spigelia. Veratr.*
- shining: Aurum. Plumbum. Rhns.  
 Selen.
- sallow: Bryon. Carb. veg. Ferr.  
 Merc. Phosphor. Sec. corn.
- sickly: Anac. Bryon. Calc. Canth.  
 Caust. Chin. Cina. Colch. Cupr.  
 Kali. N. vom. Plumb. Phosph. Ph.  
 ac. Puls. Rhns. Sec. corn. Silicea.  
 Spigel. Stann. Staph. Sulph. Ve-  
 ratr. Zinc.
- red: Acon. Arg. Arnica. Ars. Bar.  
 Bell. Bryon. Calcar. *Camph. Cann.*  
*Canth. Capsic. Caustic. Cham.*  
 China. Cic. Cina. Coce. Coff. Croc.  
 Cupr. Drosera. *Euphr. Dig. Dule.*  
 Ferr. Hyosc. Hep. Ign. Ipec. *Laur.*  
 Lye. Merc. Mur. ac. Natr. c. N.  
 vom. Op. Petr. Phosph. Plat.  
 Plumb. Puls. Rhns. Ruta. Sabad.  
 Spigel. Spong. *Stannum. Stramon.*  
 Sulphur. Thuja. Veratr. Zinc.  
 red and bluish: Aco. Bell. Bry.  
 Hep. Merc. Opium. Phosphor.
- red, burning cheeks: Acon. Arn.  
 Bellad. Bry. Cannab. *Caps. C. an.*  
 Cham. China. Cina. Coce. *Coffea.*  
 Dule. Hell. Ign. Kali. *Lycop. Merc.*  
 N. vom. Op. Plat. Sabad. *Samb.*  
 Stann. *Stram. Valer.*
- red on one side: Acon. Arn. Cann.  
 Canth. Cham. Chin. Ign. Ipec. N.  
 vom. Pulsat. Rheum.
- red, erysipelatous: Bellad. (Cal-  
 car.) Camphor. Cham. Lach. Rhns.  
 Ruta. Stram.
- sallow: Arsen. Bry. Canth. Chin.  
 Cic. Euph. Ferr. Hyosc. Ignat.  
 Ipec. Merc. Natr. mur. Nux vom.  
 Op. Plumb. Phosph. Sec. corn. Sil.
- EYES, sunken: Ambr. Arsen. Cal-  
 car. Camph. China. Cic. Cupr.  
 Coloc. Dros. Ferr. Hyosc. Jod. Lye.  
 Nitr. ac. Op. Phosphor. Ph. acid.  
 Sec. corn. *Spongia. Stannum.*  
*Staphys. Sulph. Verat.*
- FEATURES, altered: Ars. Bellad.  
 Camph. Canth. Chamom. Colch.  
 Rhns. *Spig. Veratrum.*
- FRECKLES: Calc. Kali. Lye.  
 Natr. c. Phosph.
- PALE: *Aconitum. Ambr. Anac.*  
 Arn. Ars. Bell. Bry. Calc. Camph.  
 Cann. Canth. Caps. Carb. veg.  
 Cham. China. Cic. Cina. Coloc. Con.  
 Coce. Cupr. Dig. Euphorb. Euphr.  
 Ferrum. Graphit. Helleb. Hyosc.  
 Ign. Jod. Ipec. Kali. Laches. Led.  
 Lye. Merc. Nux vom. Op. *Plum-*  
*bum. Petr. Phos. Ph. ac. Puls.*  
 Rhns. Sabin. Sec. corn. Sep. Sil-  
 icea. *Spigelia. Spong. Stann. Stram.*  
 Sulph. *Teuer. mar. Veratr. Zinc.*
- SPOTS, yellow: Calc. Hell. Lye.  
 Natr. c. Phosph. Sepia.
- red: Alumina. Ambr. Bellad.  
 Canth. Croc. Lye. Merc. Nux vom.  
 Op. Phosph. Sabadilla. Samb. Sil.  
 Sulph. Zinc.
- white: Ars. Merc. Natr. c.
- SWELLING: Alum. Ars. Bell. Bry.  
 Calc. Canth. Carb. veg. Chamom.  
 Dule. Graph. Hell. Hyosc. Kali.  
*Lycop. Natr. mur. Nitr. ac. Op.*  
 Petr. Phosph. Rhns. *Samb. Sep.*  
 Stram.

## Sensations.

*In the face generally.*

**BLOTCHES:** Antim. crud. Canth.  
Cic. Hell. Lach. *Led. N. vom. Op.*  
Puls. Viol. tr.

**BOILS:** Alum. Arn. Bell. Bry.  
Chin. Laur. Led.

**BONES**, inflammation of: Staph.

—swelling of: Sil. Spig.

—pains of: Asa f. Caps. Chel.

**COLDNESS:** Asar. Camphor. Canth.  
Cham. Cina. Dros. Hyosc. Ign.  
Ipecac. Rhus. Veratr.

**CONVULSIONS:** Bell. Calcarea.  
*Camphora. Canth. Cham. Cupr.*  
Dig. Ipec. Phosphor. Rheum.  
Stram. Sulph.

**CRAMPY FEELING:** Bellad. Cina.  
Cocc. Dig. Dulc. Hyosc. Kali.  
Nitric acid. Platina. Rhus.  
*Spongia. Stannum. Thuja. Valeriana.*

**CRUSTA LACTEA:** Ambr. Arsen.  
Bar. Bellad. Bry. Hep. Ledum.  
Mercur. Rhus. Sassap. Staph.  
Viol. tr.

**ERUPTION:** Alum. Anac. Ars. Aur.  
Bar. Calcar. Carb. veg. Caust.  
*Chamom. Cic. Colch. Coloc. Conium.*  
Dulc. Graph. Kali. Lachesis.  
Led. Lye. Merc. Natr. mur. Petr.  
Plumb. Ph. ac. Rhus. Sep. Silic.  
Stann. Staph. Veratr. Viola. tr.

—on the lips: Aco. Ant. cr. Arn.  
Bar. Bell. Bov. Bry. Cann. Canth.  
Caps. Caustic. Chin. Coloc. Con.  
Dulc. Hep. Hyosc. Ignat. Ipec.  
Kali. Led. Mur. acid. *Nux vom.*  
Rhus. Samb. Scill. Spigelia. *Spong.*  
*Staphys. Sulphur. Veratrum. Zinc.*

—around the mouth: Ant. crud. Bar.  
Bov. Calc. Carbo veget. Cocc.  
Graph. Petr. Phosphor. Ph. ac.  
Rhod. Rhus. Sep. Sil. Staph.  
Veratr. Zinc.

—around the ears: Ant. crud. Mur.  
ac. Petrol. Phosphor. Sulph.

—on the forehead: Agar. Ambr. Ant.  
crud. Arn. Baryta. Bov. Calc.  
Canthar. Carbo veget. Chamom.  
*Clem. Coccul. Euphorb. Hell. Hep.*  
Led. Mur. ac. Natrum mur. Rheum.  
Rhod. Rhus. Sep. Sil. Staph.  
Sulph.

**ERYSIPELAS:** Rhus. Bell.

**FEELING OF COLDNESS:** Arn.  
Bar. Merc. Mosch. Phosph. Plat.  
Rhod. Ran. seel.

**FLASHES OF HEAT:** Ambr.  
Arnica. Asa foet. C. an. Cocc.  
Graph. Lye. Nitr. acid. Petr.  
Sulph. Teucr. mar. Thuja. Valer.

**HEAT:** Acon. Agar. Alumina. Ambr.  
Anac. Arn. Ars. Asa f. Asar. Bar.  
Bellad. Bov. Bry. Calc. Camph.  
Cann. Canthar. Caps. Carbo veget.  
Caust. Cham. Chin. Cina. Cocc.  
Coffea. Coloc. Con. Croc. Cupr.  
Digital. Drosera. Dulcam. Euphr.  
Ferr. Graphit. Hell. Hepar. Hyosc.  
Ign. Ipec. Kali. Led. Lye. Merc.  
Mur. ac. Natrum mur. Nitr. ac.  
Nux vom. Op. Petr. Platina. Plumb.  
Phos. Ph. ac. Puls. Rheum. Rhod.  
Rhus. Ruta. Sabad. Sabina. Samb.  
Sassap. Senega. Sep. Scill. Sil.  
Spig. Spong. Stann. Staph. Stramon.  
Tar. Thuja. Veratr. Viola. tr.

**HERPES:** Bar. Bov. Calc. Carbo  
veg. Caustic. Chel. Graph. Led.  
Natr. c. Nitr. ac. Pet. Phosph.  
Rhus. Sabad. Sep. Sil.

—on the cheek: Ambra. Anac. Bar.  
Bov. Bryon. Caustic. Merc.

—on the chin: Bov. Chel. N. vom.

—on the lips (cold blisters): Rhus.

—on the temples: Alum.

**ITCHING:** Agar. Alumin. Ambr.  
Arg. Arnica. Asa f. Aur. Bry. Bov.  
Calc. Caps. Carbo veg. Caustic.  
Clem. Coloc. Con. Dulc. Graph.



Kali. Lach. Lye. N. vom. Opium.  
Petr. Phosph. Ph. ac. Plat. Plumb.  
Rhus. Ruta. Sabadilla. Sabin. Sas-  
sap. Sep. Sil. Sulph. Veratrum.  
Zinc.

MUSCLES, twitching of: Bell.

PROSOPALGIA: Aconit. Alumina.  
Asa f. Aur. Bar. Bell. Bry. Calc.  
Caps. Chin. Cina. Colch. Coloc.  
Con. Daph. Graph. Kali. Lye. Mur.  
ac. Nitr. ac. Nux vomica. Phosph.  
Sep. Spigelia. Stann. Staph. Valer.  
Veratr. Verb.

PULSATIONS: Agar. Cann. Cham.  
Clem. Croc. Hell.

TEARING: Agar. Alum. Ambr.  
Arg. Aur. Bell. Bry. Calc. Carb.  
veg. Chel. Cina. Colch. Con. Daph.  
Dig. Dulcam. Euphorbium. Graph.  
Kali. Led. Lye. Merc. Mur. ac.  
Natr. c. Nitr. ac. Phosph. Plumb.  
Rhus. Sassap. Senega. Sepiæ. Stilig.  
Spigelia. Spong. Staph. Sulphur.  
Thuj. Teucrium mar. Zinc.

PIMPLES: Agar. Ambra. Ang. Ant.  
crud. Arsen. Bar. Bellad. Bov.  
Calc. Caps. Carbo veg. Caust. Cocc.  
Con. Drosera. Graph. Kali. Lye.  
Natr. mur. Nux vom. Nitr. ac.  
Petr. Phos. Ph. ac. Rhus. Sassap.  
Sep. Sil. Sulph. Stann. Staph. Ve-  
ratr. Zinc.

—around the eyes: Calc. Hep. Ign.  
Merc. Petr. Sil. Staph. Sulph.

—on the cheeks: Ant. crudum. Arn.  
Calc. Canth. Carbo veg. Caust.  
Cham. Cina. Dulcam. Hyosc. Nux  
vom. Phosphor. Sassap. Sabina.  
Sep. Staph. Valer. Veratr.

—on the chin: Ambr. Antimon.  
crudum. Bellad. Calc. Canth. Caust.  
Cic. Clem. Con. Dros. Dulc. Hep.  
Hyosc. Lye. Nitr. ac. Nux vom.  
Rhus. Sabina. Sil. Spigelia. Spong.  
Sulphur. Thuj. Veratr.

SENSATION OF HEAT: Arn.

Asa f. Bar. Bell. Bry. Camph. Croc.  
Dros. Euphr. Ipec. Merc. Nur  
vom. Petr. Platina. Rheum. Rhus.  
Ruta. Sabadilla. Spong. Stramom.  
Thuj.

SPASMS: Ambr. Carbo vegetab.  
Camph. Cann. Cham. Cocc. Cupr.  
Dig. Hep. Op. Sepiæ. Stram.

STITCHES: Agar. Arg. Asa f. Asar.  
Aur. Bar. Bry. Calad. Canth.  
China. Cocc. Con. Dig. Graph. Ign.  
Kali. Lye. Merc. Natr. mur. Nitr.  
ac. Petr. Phosph. Plat. Plumbum.  
Rhod. Rhus. Sabad. Sabin. Sep.  
Sil. Spigelia. Spongia. Staph.  
Stann. Sulph. Thuj. Veratr. Verb.

SWEAT: Acon. Ambra. Arg. Arn.  
Ars. Asa f. Bell. Bry. Calc. Camph.  
Cann. Capsic. Carb. veg. Cham.  
China. Cina. Coccul. Coff. Con.  
Croc. Cupr. Dulc. Drosera. Hell.  
Hep. Hyosc. Ignatia. Ipic. Laur.  
Led. Lycop. Merc. Natr. mur. N.  
vom. Op. Petrol. Plat. Pulsat.  
Rheum. Rhus. Sambucus. Sassap.  
Sep. Spong. Staph. Stram. Stann.  
Sulphur. Thuj. Valer. Veratr.

—cold, on the forehead: Bry. Cin.  
Cupr. Ipec. Rheum. Veratr.

TENSION: Aconit. Alum. Arn.  
Asa f. Aur. Bar. Bry. Calc. Canth-  
aris. Chel. Colch. Con. Euphorb.  
Laurocer. Led. Lye. N. vom. Petr.  
Platina. Phosph. Ph. ac. Pulsatilla.  
Rheum. Rhus. Sabad. Samb. Sep.  
Spong. Veratr. Verb. Viol. od.

THROBBING: Arn. Bellad. Calc.  
Sabad. Staph.

TITILLATION: Bell. Cann. Coloc.  
Laur. Phosph.

ULCERS: Ars. Bry. Merc.

VESICLES: Alum. Ant. cr. Bar.  
Cantharis. C. an. Caust. Euphorb.  
Graph. Nitric acid. Petr. Plumb.  
Phosph. Rhus. Sepiæ. Silicea.  
Sulph. Valer. Zinc.

**WARMTH**, feeling of: *Asa* foet.  
*Asar.* *Cann.* *Cantharid.* *Chin.*  
*Cocc.* *Coff.* *Croc.* *Laur.* *Phos.* *ac.*  
*Puls.* *Samb.* *Seneg.* *Valer.*

*On the lips.*

(u. signifies upper lip; l. lower lip, and c. corner of the mouth.)

**BLACK**: *Aconit.* *Bryon.* *Chin.* *Mercur.* *Phosph. acid.* *Veratr.*

**BLUE**: *Agar.* *Ars.* *Caust.* *Cina.* *Con.*  
*Cupr. Dig.* *Op.* *Phosph.* *Stramon.*  
*Veratr.*

**BLISTERS**, bloody: *Natr. mur.*  
*Bry.* *Ign.* *Ph.* *ac.* *Plat.*

—u.: *Kali.* *Rhus.*

—l.: *Ars.* *Bry.* *Rhus.*

**BURNING**: *Agar.* *Anac.* *Arnica.*  
*Ars.* *Bry.* *Caps.* *C.* *an.* *Chin.* *Hyosc.*  
*Kali.* *Merc.* *Muriatic ac.* *N. vom.*  
*Phosph.* *Rhod.* *Rhus.* *Sabad.*  
*Sulph.* *Thuj.*

—u.: *Ant.* *crud.* *Bar.* *Caustic.* *Daph.*  
*Graph.* *Merc.* *Natr.* *c.* *Rhus.* *Sabad.* *Sep.* *Spigel.* *Staph.* *Veratr.*

—l.: *Asa f.* *Bar.* *Bellad.* *Bov.* *Bry.*  
*Clem.* *Daph.* *Graphit.* *Kali.* *Phosph.*  
*Phosphor. acid.* *Sabad.*

—c.: *Arn.* *Coloc.* *Daph.* *Dros.* *Natr.* *c.*  
*Zinc.*

**CANCER**: *Ars.* (*Bryon.*) *Clem.* *Con.*  
*Sil.*

**CHAPPING**: *Alum.* *Arn.* *Bry.* *Calc.*  
*Caps.* *Carbo veg.* *Cham.* *Chin.*  
*Coleh.* *Croc.* *Ign.* *Nux vom.* *Phos.*  
*Pulsatilla.* *Staph.* *Veratr.* *Zinc.*

—u.: *Caust.* *Natr. mur.* *Sab.* *Selen.*

—l.: *Cham.* *Chin.* *Daph.* *Dros.*  
*Graph.* *Natr. mur.* *Nux vom.*  
*Phosph.* *Ph.* *ac.* *Puls.*

**CONTRACTION**: *Calc.* *Sec.* *corn.*

**DEADNESS**, u.: *Calc.*

**DISTORTION**: *Bellad.* *Graphit.*  
*Nux vom.* *Sec.* *corn.*

**DRY**: *Aco.* *Agar.* *Alum.* *Ambr.* *Anac.*  
*Arn.* *Ars.* *Bar.* *Bell.* *Bry.* *Calad.*  
*Cann.* *Canth.* *C.* *an.* *Cham.* *China.*

*Con.* *Croc.* *Cycl.* *Dros.* *Graphites.*  
*Hyosc.* *Ign.* *Merc.* *Mur.* *ac.* *Nux*  
*vom.* *Phosph.* *Plat.* *Puls.* *Rhodod.*  
*Rhus.* *Stram.* *Thuj.* *Veratr.* *Zinc.*

—u.: *Amm.* *Plat.* *Sulph.*

—l.: *Daph.* *Merc.* *Sabin.*

**ERUPTION**, vesicular: *Alumina.*

*Canth.* *Laur.* *Natrum mur.* *Rhus.*

—u.: *Amm.* *mur.* *Ars.* *Carbo veg.*  
*Cic.* *Con.* *Graph.* *Hell.* *Laur.* *Mur.*  
*ac.* *Plat.* *Seneg.* *Sil.* *Stront.* *Valer.*

—l.: *Aur.* *Bell.* *Bry.* *Carbo veg.*  
*Clem.* *Kali.* *Laur.* *Mur.* *ac.* *Natr.*

*mur.* *Phos.* *Plat.* *Rhodod.* *Sassap.*  
*Sepia.* *Staph.* *Sulph.*

—c.: *Caust.* *Daph.* *Laurocer.* *Seneg.*

**GLANDS**, indurated: *Con.* *Sulph.*  
*Zinc.*

—ulcerated: *Ign.*

**HEAT**: *Ambr.* *Arn.* *Bell.* *Canth.*  
*Carbo an.* *Daph.* *Hep.* *Sep.*

**HERPES**: *Anac.* *Ars.* *Rhus.* *Sep.*

—u.: *Phosph.* *Sep.*

—l.: *Sep.*

—c.: *Carbo veg.* *Phosph.* *Sep.*

**PALE**: *Ferr.* *Kali.* *Lyc.* *Valer.*

**PEELING OFF**: *Alum.* *Bell.* *Canth.*  
*Caps.* *Cham.* *Con.* *Daphne.* *Nux*  
*vom.* *Platina.* *Plumb.* *Puls.*

—u.: *Sulph.*

—l.: *Daph.* *Kali.* *Natrum mur.*

**PIMPLES**: *Cann.* *Caps.* *China.*  
*Dule.* *Hyosc.* *Ipec.* *Kali.* *Mur.* *ac.*  
*Nux vom.* *Rhus.* *Spong.*

—u.: *Aco.* *Ant.* *crud.* *Arn.* *Bell.* *Calc.*  
*Carbo veg.* *Capsicum.* *Caust.* *Dig.*

*Kali.* *Led.* *Lycop.* *Nux vom.* *Rhus.*  
*Sassap.* *Sep.* *Scill.* *Silicea.* *Staphys.*  
*Thuj.* *Zinc.*

—l.: *Bell.* *Bry.* *Calc.* *Capsic.* *Caust.*  
*Ign.* *Merc.* *Mur.* *acid.* *Natrum c.*  
*Rhus* *Samb.* *Sil.* *Spig.*

—c.: *Antim.* *crud.* *Bar.* *Bellad.* *Calc.*  
*Cann.* *Canth.* *Caustic.* *Coloc.*  
*Phosph.* *Rhod.* *Rhus.* *Veratr.*

**PRESSURE**, u.: *Sulph.* *ac.*

—l.: *Valer.*

**RHAGADES:** Arn. Bryonia. Cann.  
Caps. Croc. Ign. Plat. Puls.

—u.: Agar. Kali. Natr. mur. Ph. ac.  
Sabad.

—l.: Bry. Cham. Nux vomica. Puls.  
Plat. Sulph.

—c.: Ant. crud. Merc.

**ROUGH:** Anac. Calc. Mur. acid.  
Plat.

—u.: Calc. Sulph.

—l.: Merc. Natr. mur.

**SCURFS:** Ars. Bar. Bryon. Cann.  
Cham. Ign. Mur. ac. N. vom. Staph.  
Sulph.

—u.: Ars. Cic. Kali. Mercur. Petr.  
Sil. Staph. Sulph.

—l.: Alum. Calc. Natrum mur. Ph.  
ac. Sulph.

—c.: Calc. Graph. Ign. Sil.

**SPASM:** Ambr. Bellad. Caust. Kali.  
Merc. Plat.

**SWELLING:** Arn. Alum. Aur. Bell.  
Bry. Carbo veg. Caps. Chin. Dig.

Natr. mur. Opium. Rhus. Stram.  
—u.: Argent. Bar. Bell. Bov. Canth.

Carbo veg. Con. Daph. Graph. Hep.  
Kali. Lye. Merc. Natr. mur. Nitr.  
ac. Petr. Phosph. Rhus. Staphys.  
Sil. Sulph. Thuj. Zinc.

—l.: Alum. Asa f. Calc. Caust. Daph.  
Lye. Mur. ac. Natrum mur. Puls.  
Sep. Sil.

**TREMBLING:** Stram. Sulph.

—l.: Arn. Con.

**TWITCHING:** Arsenic. Cham. Dule.

—u.: Carbo veg. Natr. c. Plat. Sabad.  
Thuj. Zinc.

—l.: Bry.

**TUBERCLES:** Bell. Caust. Con.  
Sep. Sil. Sulph.

—u.: Arsenicum. Bar. Graphit.  
Magnes. c.

—l.: Ign. Sep.

—c.: Bry. Stront.

**ULCERATION,** c.: Calc.

**ULCERS:** Ars. Bellad. Capsic.  
Cham. Chin. Cic. Con. Dule. Graph.

Natr. mur. Nitr. ac. N. vom. Staph.  
Sulph.

—u.: Caps. Caust. Daph. Kali. Merc.  
Staph.

—l.: Bry. Caps. Ign. Lye. Merc.  
Nux vom. Phosphor. Phos. ac.  
Puls. Sep. Sil. Staph. Zinc.

—c.: Arn. Bell. Graph. Hep. Ign.  
Merc. Nux vom. Natr. mur. Phosph.  
Sil. Zinc.

*Lower jaw and articulation of the  
jaw.*

**BONE,** swelling of: Sil.

**CONTRACTION:** Nux vom. Puls.  
Stann.

**CRAMP:** Alum. Asa fœt. Asar. Bell.  
Chamom. Cocc. Coleh. Ignat. Kali.  
Merc. Mur. ac. N. vom. Plat. Rhus.  
Spig. Spong. Stann. Sulph.

—in the joint: Acon. Arnica. Bell.  
Bry. Calc. Camph. Canthar. Cic.  
Colehic. Con. Hyosc. Ign. Laur.  
Merc. N. vom. Op. Phosph. Plat.  
Plumb. Rhus. Sec. corn. Spig.  
Stram. Sulph. Verat.

**CRACKING:** Nitr. acid. Rhus. Sa-  
bad.

**DEPRESSION:** Op.

**DISLOCATION:** Ign. Petr. Ph. ac.  
Rhus. Staph.

**PAIN,** arthritic: Caust.

—crampy: Digit. Plat. Sassap. Spong.  
Stann.

**PRESSURE:** Ambr. Arn. Asar.  
Aur. Bry. Chin. Coff. Cupr. Dros.  
Ign. Led. Phosph. Sabin. Sassap.  
Spig. Veratr.

**RIGIDITY:** Bellad. Caust. Cocc.  
Euphr. Graph. Hyosc. Merc. Nux  
vom. Petr. Sassap. Sep. Thuj.

**SWELLING:** Acon. Arn. Ars. Staph.  
Veratr.

**TEARING:** Agar. Anac. Arn. Aur.  
Bar. Bell. Bov. Bry. Canth. Carb.  
anim. Chin. Cocc. Coff. Coleh.  
Droser. Graph. Laur. Mercur. Nux

- vom. Phosphor. **Plumb.** Puls. Sassap. Spig. Stann. *Sulph.*
- TWITCHING: Arn. Bell. Bryon. Canth. Chin. Cina. Con. Ign. Rhus. Sabin. Valer.
- Chin.*
- BURNING: Anac. Ant. crud. Bov. Canth. Canst. Rhus. Spong.
- COLDNESS: **Veratr.**
- CRAMP: Bell.
- DRAWING: Caust. Cupr.
- HERPES: Bov. Chelid. Natr. mur. Nux vom. Sil.
- ITCHING: Alum. Con. Dig. *Kali.* *Lyc.* Natr. mur. Op. Phosph. Plat. Puls. Sassap. Seill. Spig. Stront. Sulph. *Zinc.*
- NUMB FEELING: Asa f. Plat.
- PIMPLES: Ambr. Anac. Ant. cr. Bell. Calc. Canth. Canst. Cic. Clem. Con. Dros. Dule. Graph. Hyosc. *Lyc.* Merc. N. vom. Nitr. ac. Rhus. Sabin. *Sassap.* Sil. Spig. Spong. Sulph. Thuj. *Veratr.* Zinc.
- PUSTULES: Merc. Oleand. Sabin. Zinc.
- SWELLING: Carb. veg.
- TEARING: Aur. *Caust.* Plat.
- ULCERS: Hep.
- VESICLES: Hep.

## VI. TEETH AND GUMS.

### Teeth.

- BLACK: Ignat. Merc. Plumb. Sep. Staph.
- BLEEDING: Ambr. Bar. Graph. Phosph. Ph. ac. Sulph. *Zinc.*
- BRITTLE: Lach. Plumb. Sabad. Staph.
- DECAY: Amm. Carb. an. Sil.
- DULL: Agar. Caps. Nitr. acid. Puls. Spong. Staph.
- FALLING OUT: Ars. Bry. Merc. N. vom. Plumb. Sec. corn.
- FETID: Calc. Carb. veg. Daph. Graph. Kali.
- GRITTING: Acon. Ant. crud. Ars. Bar. Bellad. Canth. Caust. Chamom. Cic. Coff. Con. Hyosc. Ign. Merc. Plumb. Sec. corn. Sep. Stram. Veratr.
- HOLLOW: Asar. Calcar. Daph. Hyosc. Plumb. Phosph. Sabad. Selen. Sep. Sil. Staph.
- LOOSE: Acon. Arn. Bry. Camph. Cham. Chin. Cocc. Hyoseyam. N. vom. Op. Puls. Rheum. *Rhus.* Puls. Veratr.
- MUCUS ON TEETH: Alum. Arn. Bov. Bry. Cham. Daph. Iod. Plumb. Selen.
- SMOOTH: Phosph. Selen.
- TEETHING: Acon. Arn. Bryon. Chamom. Cic. Cina. Coff. Cupr. Hyosc. Ign. Ipec. N vom. Op. Puls. Rhus. Stram.
- TOOTHACHE, see Index.
- YELLOW: Iod. Lyc. Nitr. ac.

### Gums.

- BLUE: Sabad.
- BLEEDING: Agar. Alum. Ambr. Ang. Bar. Bellad. Bov. Calc. Carb. veget. Caustic. Con. Enphr. Graph. Iod. Kali. Lycop. Merc. Natr. mur. Nitr. ac. N. vom. Phosph. Ph. ac. Ruta. Sep. Staph. Sulph. Zinc.
- BURNING: Bell. Chamom. Merc. Mur. ac. N. vom. Petr. Puls. Rhus. Sep.
- CORRODED: Merc. Staph.
- FISTULA: Calc. Canth. Caust. Natr. mur. Petr. Puls. Sil.



GROWTHS: Staph.  
 HEAT: Bell. Lye.  
 INDENTED: Merc.  
 INFLAMED: Bov. Iod. Natr. mur.  
     N. vom. Petr. Phosph. Sil.  
 PALE: Carb. an. Merc. Nitr. acid.  
     Plumb. Sabin. Staph.  
 PUTRID: Ambr. Nux. vom. Staph.  
 RECEDING: Bov. Carb. veg. Graph.  
     Merc. Natr. carb. Phosph. Ph. ac.  
     Rhus. Sep. Staph.  
 REDNESS: Carbo an. Iodine. Merc.  
     Nitr. Sep.  
 SENSITIVE: Amm. Ang. Arsen.  
     Carbo veg. Caust. *Natr. mur.*  
     Phosph. Puls.  
 SPONGY: Ang. Bry. Graph. Merc.  
     N. vom. Staph.  
 SCURVY: Cic. N. vom. Staphys.  
     (See Index.)

SUPPURATION: Canth. Caust.  
     Lach. Mere. Petr.  
 SWOLLEN: Alnm. Ambr. Ang.  
     Bar. Bellad. Bism. Bov. Calc. Carbo  
     an. *Carbo veg.* Caps. *Caust. Cham.*  
     Chin. Cocce. Graphites. Hep. Hyosc.  
     Jod. Kalic. Lach. Lye. Merc. Mur.  
     ac. *Natr. mur.* N. vom. *Nitr. ac.*  
     *Petr. Phosph.* Plumb. Puls. Sabin.  
     Sep. Sil. Spig. Spong. Staph. Sulph.  
 TUBERCLES: Caust. Phosph. ac.  
     Plumb. Staph.  
 ULCERATED: Alum. Aurum. Bov.  
     Calcar. Kali. Kali bieh. Lye. Merc.  
     Millef. N. vom. *Phosph.* Sabin.  
     Stann. Staph. Zinc.  
 VESICLES: Bellad. Calc. Canth.  
     Daph. Nux vom. Petr. Sep. Staph.  
 WHITE: Merc. Staph.

## VIII. MOUTH.

### Buccal Cavity.

APHTHÆ: Bry. Caust. Cham. Chin.  
     Ipec. Merc. Nitr. ac. Nux vom.  
     Sulphur. Sulph. ac.  
 BLISTERS: Ambr. Anac. *Canth.*  
     *Calc.* Caps. Jod. Merc. Nitr. acid.  
     Phosph. Spong. Staph. *Thu.*  
 BLUE: Cic. Merc.  
 BLEEDING: Bell. Canth. *Mancin-*  
     *nella.* Millefol.  
 BURNING: Asa f. Asar. Bellad.  
     Bov. Carbo veget. *Cantharis.*  
     Cham. Cupr. Merc. Petr. Phos.  
     Plumb. Sulph. Veratr.  
 BREATH, sour: Nux vom.  
 —bad. Acon. Ambr. Arn. Agar. Aur.  
     Bar. Bell. Bry. Camph. Canth.  
     Capsic. Calc. Carbo anim. Carbo  
     veget. Cham. Chin. Croc. Digital.  
     Ferr. Graphit. Kali. c. Hyosc. Ign.

Ipec. Merc. N. vom. Petr. Plumb.  
     Puls. Sepiæ. *Spigel.* Stram. Sulph-  
     ur. Zinc.  
 DRYNESS: Aco. Ambr. Amm. Ars.  
     Aur. Antim. crud. Arn. Asa f.  
     Asar. Bar. Bell. Bry. Calc. Carbo  
     veg. Cann. *Canth.* Capsic. Cham.  
     China. Cina. Cocce. Coffea. Colch.  
     Croc. Ferr. Hyosc. Ign. Ipec.  
     Kali c. Kali bieh. Lye. Mur. ac.  
     Merc. Natrum c. Nitr. Nitr. ac.  
     N. vomica. Petr. Phosph. Phosph.  
     ac. Rhod. Plumb. Puls. Sabad.  
     Sassap. Seneg. Sep. Sil. Spig.  
     Stram. Sulph. Thnj. Veratr. Zinc.  
 FOULNESS: Arn. Ars. Aur. Bell.  
     Bov. Bryon. Capsic. Carb. veg.  
     Cham. Chin. Crotal. Graph. Hyosc.  
     Iod. Merc. N. vom. Nitr. ac. Puls.  
     Ruta. Sabin. Spigelia. Staph.  
 GROWTHS: Staph.

**HEAT:** Amm. Calc. Camphora.  
Carbo veg. Cham. **Mercur.** Natr. c.  
Phosph. Plumb. Sil. Sulph.

**INFLAMED:** Acon. Bismuthum.  
**Brom.** *Calad.* Canth. Colch. **Ign.**  
**N. vom.** *Veratr.*

**ROUGH:** Carbo veg. Caustic. Cina.  
Cocc. Dig. Ipec. Millefol. Ph. ac.

**SKIN DETACHED:** Mere.

**SWELLING:** Amm. Causticum.  
Canth. **Merc.** Sep. Zinc.

**TRISMUS:** Calc. Con. Phosphor.  
Sulph.

**ULCERS:** Arg. Graphites. **Kali**  
**bichr.** **Merc.** *Natr. mur.* **Nitr. ac.**  
**N. vom.** Opium. Petr. *Phosph.*  
*Plumb.* Sepiæ. Sil. Staph. Zinc.

#### Palate.

**BLISTERS:** Iod. *Nux vom.* **Nitr.**  
ac. Phosph. Spig.

**BURNING:** Carbo veget. Camph.  
Cann. Canth. Caustic. Cocc. Mur.  
ac. Phosph. Phosph. ac. Rhodod.  
Seneg. *Spig.* Staph. Thuj.

**DRYNESS:** Camph. Cann. Cina.  
*Cocc.* **Hell.** **Merc.** *Nux vom.* **Op.**  
*Plumbum.* Samb. Sepiæ. Staph.  
*Stram.* Sulph. Veratr.

**INFLAMMATION:** **N. vom.**

**PEELING OFF:** Amm. Euphorb.

**REDNESS:** Ars. **Bell.** Canth.

**SMARTING:** Carbo veget. Coloc.  
Canth. Cham. China. Kali c. **Merc.**  
Seneg. *Zinc.*

**SORE:** *Daph.* **Nitr. ac.** Phosph.  
acid.

**STINGING:** Bar. Camph. Caust.  
Coloc. **Ign.** Kali c. Phosphor.  
Staph. Zinc.

**SWELLING:** Apis. Ars. **Bell.** Caps.  
Chin. **Merc.** *Natr. mur.* **N. vom.**  
Seneg. *Stram.*

**ULCERS:** Apis. Aur. **Kali bichr.**  
**Merc.** *Natr. mur.* **Nitr. ac.** Ph. ac.  
Sil.

**WHITE:** **Merc.**

#### Pharynx.

(Compare Larynx.)

**APHTHÆ:** Spong. Staph.

**BALL,** hysteric: Calc. *Causticum.*  
*Graph.* **Ign.** Kali c. *Natrum mur.*  
*Plumb. Sep.* Sil. Sulph. Valer.

**BURNING:** Aco. Alum. Amm. Ars.  
Arn. Asa fæt. **Bellad.** Calc. **Camph.**  
*Cannabis.* Canth. Carbo veg. Caus-  
ticum. Cham. *Cocc.* Con. Digital.  
Dros. Euphorb. *Graphites.* Hyosc.  
Iod. **Merc.** **Nitr. ac.** **N. vom.** Petr.  
Phosphor. *Puls.* *Rhod.* **Sabad.**  
Seneg. *Stram.* Sec. corn. Spongia.  
Sulph. Veratr.

**CONTRACTION:** Aco. Alum. Arg.  
Ars. Asa fæt. Bellad Calc. Caus-  
ticum. Chin. Cic. *Daph.* Hyosc.  
**Merc.** *Natrum muriat.* Phos. Sabad.  
*Stram.* Sulph. Veratr.

**CROUP,** gangrenous: Ars. Chin.

—membraneous: Aco. **Brom.** Cham.  
Dros. **Hep.** Iodine. **Phosph.** Samb.  
Spong.

—disposition to: Lycopod. Phosph.

**DEGLUTITION DIFFICULT:**  
Aconit. Arg. Arn. Asar. Bell. Bry.  
Calc. Canth. Carbo vegetab. Cham.  
Chin. Hyosc. **Ign.** Ipec. *Kali bichr.*  
*Merc.* *Natr. mur.* **Nitr.** *Nux vom.*  
**Op.** Phosph. Ph. ac. *Puls.* *Pyro c.*  
**Sabad.** Spong. *Stramon.* Sulph.  
Thuj.

—desire for: **Bell.** Caust. Con. Ipec.  
**Merc.** Seneg. Sabad. Thuj.

—painful: Acon. Alum. Arg. Ars.  
Asa f. Bar. **Bell.** Bry. Calc. Camph.  
Canthar. Caps. Carbo veg. Causti-  
cum. Cham. China. *Cocc.* Coffea.  
Croc. Ferr. *Graph.* Hell. Hep. **Ign.**  
Ipec. Kali c. Lycopod. **Merc.** *Natr.*  
*mur.* **N. vom.** Petr. *Phosph.* Ph. ac.  
*Puls.* Rhns. *Ruta.* Sabad. Sabin.

- Sep. Seneg. Sil. *Spig.* Staph. Stram. Sulph. Zinc.
- DRYNESS: Agaric. Alumina. Ambr. Anac. Ant. crud. Ars. *Asa f. Bar.* Bell. Bry. *Calad.* Calc. *Canth.* *Causl.* Cham. Cocc. Colch. Cupr. Hyosc. Ign. *Ipec.* Kali c. Lyc. *Merc.* Mur. ac. Natr. mur. *Nitr. ac. N. vom.* Op. Petr. Phosph. Ph. ac. Plat. Plumb. Puls. Rhus. *Sabad.* Sabina. Sec. corn. Sepiæ. Sil. Spongia. Stann. Staph. Stram. Thuj. Sulph.
- INFLAMMATION: Acon. Agar. Apis. Alum. Arg. Ars. Bar. Bell. Bry. *Canth.* Caps. Cham. Con. Euphorb. Iod. Lach. Lyc. *Mercur.* Petr. Phosph. Ph. ac. Puls. Ruta. Seneg. Sep.
- LUMP IN THROAT: *Ambr.* Ant. crud. Arn. Ars. Bell. Calc. Canst. Croc. Hep. *Mercur.* Natr. m. Plumb. *Sabad.* Sab. Sep.
- PARALYSIS: Aco. Bell. Cocc. *Ipec.* Plumb. Sep.
- AS IF A PLUG IN THROAT: Amm. Bar. Chamom. Crocc. Ferr. Hep. Ign. *Merc.* Mur. ac. Natr. mur. Nux vom. Sep. Sulph.
- REDNESS: Aco. Alum. Apis. Bell. Canth. *Merc.* Nitr. ac. Spong.
- ROLLING OF DRINKS, audible: Cuprum. Laur.
- ROUGH: Acon. Ambr. *Antim. crud.* Arg. Ars. Bar. Bryon. Carbo veget. Canstic. *China.* *Coccul.* Dros. Euphr. Graph. Hep. Hell. Hyosc. Ign. *Ipec.* Mur. acid. Natr. c. N. vom. Phosph. Ph. ac. Plat. Plumb. Rhod. Rhus. *Sabad.* *Sassap.* *Senega.* Spong. Stann. Staph. Sulph. Thuj. *Veratr.*
- SCRAPING: Alum. Anac. Arg. Ars. Bry. Carbo an. Cocc. *Croc.* Dros. Dulcam. Kali c. Hyosc. *N. vom.* Puls. Rhus. *Sabad.* Stann. Thuj. *Veratr.*
- SMARTING: *Ambr.* Carbo veget. Dros. Hyosc. N. vom. Ph. ac. Sep. SORE THROAT, chronic: Ammon. Arg. *Bar.* Bov. Dulc. *Lach.* Lyc. Nitr. Pulsatilla. Rhus. Zinc. —in measles: *Carbo veg.*
- HEAT: Bellad. Cham. Dulcam. Euphr. Ferr. Hyosc. Iodine. *Mercur.* Natrum c. Nitric ac. Phosphor. Rhododend. Sepiæ. Stram.
- SPASM: Alumina. Carbo veget. Caps. Con. Dig. *Graph.* *Ipec.* Phosphor. *Sassap.* Sepiæ. Stram. Sulph. Veratr.
- SWELLING: *Aco.* Arg. Bellad. Bry. Carbo animalis. Cham. Chin. Hep. Hyosc. Iodine. Ign. Lyc. *Merc.* Petr. *Spig.* Stann. Sulph.
- AS IF SWOLLEN: *Veratr.*
- ULCERS: Arg. Calc. Iod. Ign. *Merc.* Nitr. ac.
- UVULA INFLAMED: Apis. Bell. Brom. *Millefol.* *Mercur.* Ruta. Zinc. —elongated: Caps. Chel. Croc. Plat. *Sabad.* Sulph. —swollen: Bell. Calc. China. Coff. Dulc. Kali bichr. Lycop. *Merc.* N. vom. Pulsatilla. *Sabad.* Seneg. Sil. Sulphur. Zinc.
- Saliva.
- FRONT OF MOUTH: Bell. Calc. Camph. Canth. Chamom. Cic. Cocc. Cupr. Hyosc. Ign. Laur. Op. Plumb. Sec. corn. Stram. *Veratr.* —bloody: Cantharis. Hyosc. Pyrocarb. Sec. cornut. Stram.
- MUCUS, bitter: Arn. —bloody: Alum. Amm. Bism. Iod. Lyc. *Mercur.* Phosphor. Sec. corn. Selen. Sulphur. Stram. Thuj. Zinc. —foul: Bellad. Bov. Calcareæ. Carbo veg. Cham. China. Sep. Zinc. —yellow: Bry. *Spig.* —gray: Arg. —green: Carbo vegetab. Colch. Natr. mur. Plumb. Zinc.

—salt: Alum. Amm. Bovista. Graph.  
N. vom. Phos. Rhus. Sulph.

—sour: Plumb.

—sweetish: Asar.

—tasting badly: Merc.

—smelling badly: Chin. Ignat. Puls.  
Rheum.

—viscid: Alum. Ambr. Anac. Ant.  
crud. Arg. Asar. Bell. Bry. Camph.  
Caps. Chamom. Coff. Dule. Euphr.  
Iod. Ign. Merc. Nux vom. Phosph.  
Ph. ac. Plumb. Pulsat. Rhus.  
Samb.

SALIVATION: Ant. crud. Agar.  
Alum. Apis. Bellad. Brom. Bry.  
Camph. Canth. Cham. Chin. Cocc.  
Colchie. Con. Cyc. Dros. Dule.  
Euphr. Ferr. Hell. Hyosc. Ign. Iod.  
Kali c. Ipec. Merc. Nitrum ac.  
Nux vom. Op. Phosph. Plumb.  
Puls. Rhus. Stram. Veratr.

SALIVA, bitter: Arn. Ars. Merc.  
Thuj.

—frothy: Ant. crud. Bell. Bry. Cam-  
phora. Canth. Cic. Cocc. Ign. Ipec.  
Phosph. Plumbum. Sil. Sabin. Sec.  
corn. Spigelia. Stram.

—watery: Asarum. Camphora. Coleh.  
Dig. Dros. Hell. Iod. Ipec. Lach.  
Nux vom. Phosph. Plumb. Staph.

—increased flow: Acon. Alum. Arg.  
Asar. Bar. Bell. Bov. Brom. Bry.  
Calc. Camph. Canth. Carb. veget.  
Caustic. Cham. Chin. Cocc. Colchie.  
Dros. Dule. Graph. Hell. Hep.  
Hyosc. Ign. Ipec. Merc. Natr. mur.  
N. vom. Phosph. Pulsat. Rhus. Sep.  
Spig. Spong. Staph. Stram. Sulph.  
Veratr.

### Tongue.

BLACK: Ars. Chin. Op. Sec. corn.

BLOTCHES: Apis. Dros. Lycop.  
Phosph.

BLISTERS: Amm. Arg. Ars. Apis.  
Bar. Bell. Brom. Bry. Calc. Canth.

C. an. Caust. Cham. Chin. Croc.  
Graph. Hell. Kali carb. Mur. ac.  
Natr. mur. Nitr. ac. N. vom.  
Phosph. Puls. Sabad. Sep. Spig.  
Spong. Staph.

BLUE: Ars. Dig. Lach. Mur. acid.  
Sabad.

BURNING: Acon. Alum. Argent.  
Ars. Asar. Bar. Bell. Bry. Calc.  
Canth. Carb. an. Caust. Chin.  
Coff. Coloc. Croc. Graph. Hyosc.  
Ign. Kali carb. Merc. Natr. mur.  
Op. Phosph. Ph. ac. Plat. Plumb.  
Rhodod. Sabad. Spig. Spong.  
Sulph. Veratr.

CANCER: Apis. Ars.

COATED, brown: Arsen. Bell. Bry.  
Carb. veg. Crotal. Mancia. Plumb.  
Sabin. Sec. cor. Sulph.

—yellow: Acon. Alum. Arn. Ars.  
Bellad. Bry. Cam. Chamom. Chin.  
Cocc. Kali bichr. Lach. Merc. Nitr.  
acid. Sabad. Sabina. Senec. Stann.  
Zinc.

—like a crust: Chin.

—like fur: Merc. Puls.

—frothy: Plumb.

—slimy: Acon. Agar. Bell. Canth.  
Chamom. Chin. Cina. Ignat. Merc.  
Nitr. Nux vom. Phosph. Plumb.  
Puls. Sec. corn. Sep. Sil. Stann.

—dirty: Acon. Ant. crud. Arn. Chin.

—blackish: Ars. Bry. Merc. Sec.  
corn.

—white: Acon. Agar. Alum. Anac.  
Ant. crud. Ars. Asar. Arn. Bell.  
Bryon. Calcar. Canth. Cam. Carb.  
veg. Cham. Chin. Cina. Croc. Dig.  
Euphr. Ign. Ipec. Merc. Mur. ac.  
Nat. mur. Petr. Phosph. Plumb.  
Puls. Rheum. Rut. Sabad. Sabin.  
Sassap. Selen. Seneg. Spigel.  
Staph. Sulphur. Veratr. Zinc.

CRACKS: Bar. Calc. Ign. Merc.

CRACKED: Bar. Bell. Bryon. Calc.  
Cham. Chin. Plum<sup>b</sup>. Ph. ac. Sec.  
corn. Spig.



**DRY:** *Acon.* *Ambr.* *Arn.* *Ars.* *Bell.*  
*Bry.* *Calc.* *Canth.* *Carb. veg.* *Caust.*  
*Cham.* *Cocc.* *Coff.* *Con.* *Dulc.*  
*Kali carb.* *Lyc.* *Hell.* *Hyosc.* *Ipec.*  
*Lach.* *Merc.* *N. vom.* *Op.* *Phosph.*  
*Ph. ac.* *Plumb.* *Puls.* *Rhus.* *Sep.*  
*Staph.* *Stram.* *Sulph.* *Veratr.* *Zinc.*  
**HEAT:** *Acon.* *Bellad.* *Canth.* *Carbo*  
*veget.* *Plumb.* *Pulsat.* *Stram.*  
*Sulph.*  
**HEAVY:** *Anac.* *Bell.* *Calc.* *Carb.*  
*veget.* *Merc.* *Mur. ac.* *Natr. mur.*  
*Plumb.* *N. vom.* *Ruta.*  
**INDENTED:** *Merc.*  
**INFLAMMATION:** *Aconit.* *Arn.*  
*Canthar.* *Cham.* *Nux vom.* *Plumb.*  
**PAPILLÆ,** erect: *Croc.* *Oleand.*  
 —inflamed: *Bell.*  
**PARALYSIS:** *Acon.* *Bar.* *Cocc.*  
*Crotal.* *Dulcam.* *Ipec.* *Hyosc.*  
*Laur.* *Mur. ac.* *N. vom.* *Op.* *Rhus.*  
*Rut.* *Sec. cor.* *Stram.*  
**PEELING OFF:** *Spig.*  
**RANULA:** *Ambr.* *Calc.* *Natr. mur.*  
*Nitr. ac.* *Staph.*  
**RED:** *Cham.* *Veratr.*  
**ROUGHNESS:** *Acon.* *Alum.* *Bar.*  
*Calc.* *Carb. veg.* *Cocc.* *Dulc.* *Graph.*  
*Hyosc.* *Merc.* *Phosph.* *Sep.* *Stram.*  
*Sulph.*  
**SMARTING:** *Acon.* *Arn.* *Arsen.*  
*Asar.* *Bell.* *Cham.* *Chin.* *Coloc.*  
*Croc.* *Dros.* *Ign.* *Ipec.* *Natr. mur.*  
*Op.* *Sep.* *Sulph.* *Zinc.*  
**SORE:** *Agar.* *Ars.* *Canth.* *Cic.* *Dig.*  
*Kali c.* *Lyc.* *Merc.* *Mur. acid.* *Natr.*  
*mur.* *Nitr. ac.* *Op.* *Sen.* *Sil.*  
**SUPPURATION:** *Canth.* *Mancin.*  
**SWELLING:** *Anac.* *Apis.* *Ars.* *Bell.*  
*Bryon.* *Calad.* *Chin.* *Cic.* *Dig.* *Dros.*  
*Glonoin.* *Hell.* *Merc.* *Natr. mur.*  
*Plumb.* *Pyrocarb.* *Ruta.* *Sabad.*  
*Sec. Sil.* *Stram.* *Veratr.*  
**TONGUE PROTRUDED:** *Aco.*  
*Plumb.*  
**TREMBLING:** *Bell.* *Phos.* *ac.*  
*Stram.*

**TWITCHES:** *Sec. corn.*

**ULCERS:** *Amm.* *Apis.* *Arsen.*  
*Canth.* *Chin.* *Cic.* *Dros.* *Kali bichr.*  
*Lyc.* *Mur. ac.* *Merc.* *Natr. mur.*  
*Nitr. ac.* *Op.*

—at the edge of tongue: *Caust.*  
*Merc.* *Nitr. ac.* *Thuj.*

—under the tongue: *Lyc.*

**WHITE:** *Arsen.* *Canth.* *Coloc.* *Hell.*  
*Kali carb.* *Nitr. ac.* *Nux vom.* *Op.*  
*Petr.* *Phosphor.* *Puls.* *Sep.* *Sulph.*  
*Veratr.*

**WITHERING:** *Veratr.*

### Speech

**DUMB:** *Cicuta.* *Pyrocarb.* *Stram.*  
**SPEECH,** impeded: *Acon.* *Anac.*  
*Arg.* *Arn.* *Ars.* *Bell.* *Bry.* *Calc.*  
*Cann.* *Canth.* *Carb. veg.* *Caust.*  
*Cocc.* *Conium.* *Dulc.* *Hyosc.* *Ign.*  
*Lyc.* *Merc.* *Mur. ac.* *Natr. mur.*  
*N. vom.* *Op.* *Plumb.* *Petr.* *Phos-*  
*phor.* *Sec. cor.* *Spong.* *Stamm.* *Stram.*  
*Sulph.* *Veratr.* *Zinc.*  
 —hurried: *Acon.* *Bry.* *Hep.* *Merc.*  
 —stuttering: *Cocc.* *Stram.*  
 —slow: *Thuj.*  
 —low tone: *Bell.* *Canth.* *Chamom.*  
*Chin.* *Hep.* *N. vom.* *Op.* *Sec. corn.*  
*Staph.*  
 —nasal: *Bry.*  
**SPEECHLESS:** *Arn.* *Ars.* *Bar.*  
*Bell.* *Bryon.* *China.* *Con.* *Crotal.*  
*Cupr.* *Hyosc.* *Lyc.* *Merc.* *Mur. ac.*  
*N. vom.* *Op.* *Phosph.* *Plumb.* *Puls.*  
*Ruta.* *Sec. corn.* *Stram.* *Veratr.*  
**STUTTERING:** *Aco.* *Arn.* *Bell.*  
*Cham.* *Euphr.* *Hell.* *Opium.* *Sec.*  
*corn.* *Stram.* *Verat.*  
**STAMMERING:** *Euphr.*  
**VOICE,** clear: *Chin.* *Secale corn.*  
*Spong.* *Stram.* *Veratr.*  
 —low: *Ant. crud.* *Canth.* *Ign.* *Nux*  
*vom.* *Op.* *Puls.* *Secale corn.* *Spong.*  
*Veratr.*

—indistinct: *Bry. Cann. Cocc. Hyosc.*  
**See. corn. Stram. Veratr.**  
 —loss of: *Antimon. crud. Cann.*

*Dros. Hyosc. Lach. Plumb. Ruta.*  
**Spong. Veratr.**

## IX. APPETITE.

LOSS OF APPETITE: *Aco. Agar.*  
*Alumina. Ant. crud. Arg. Arn. Ars.*  
*Bar. Bell. Bry. Calc. Canth. Carbo*  
*vegetabil. Caustic. Cham. China.*  
*Cic. Cocc. Coff. Colch. Con. Croc.*  
*Cupr. Cycl. Dig. Dros. Dule. Ferr.*  
*Graphites. Hell. Hep. Hyosc. Ign.*  
*Ipec. Lach. Lyc. Merc. Natr. mur.*  
*Nux vom. Op. Phosphor. Plat. Puls.*  
*Rhodod. Rhus. Ruta. Sabad. Sec.*  
*corn. Sep. Sil. Spigel. Spong.*  
*Stann. Staph. Sulph. Thuja. Veratr.*  
*Zinc.*

AVERSION TO BEER: *Bell.*  
*Cham. China. Cocc. N. vomica.*  
*Phosph. Spig. Spong. Stann.*  
*Sulph.*  
 —to brandy: *Ign. Merc.*  
 —to bread: *Con. Ign. Lycopod.*  
*Natr. mur. Nitr. ac. Nux vom.*  
*Phosph. Ph. ac. Puls. Rhus. Sep.*  
*Sulph.*  
 —to brown bread: *Kali c. Lyc. N.*  
*vom. Puls. Sulph.*  
 —to solid food: *Ferr. Mercur. Staph.*  
 —to fat food: *Ars. Bell. Bry. Calc.*  
*Carbo veg. Drosera. Hell. Hep.*  
*Merc. Natrum mur. Petr. Pulsatilla.*  
*Psorin. Rhus. Sep. Sulph.*  
 —fish: *Graph. Zinc.*  
 —meat: *Alum. Arn. Ars. Aur. Bry.*  
*Calc. Carbo veget. Causticum. Ferr.*  
*Graph. Ign. Kali bicher. Lyc.*  
*Mercur. Mur. ac. Natr. mur. Nitr.*  
*ac. N. vom. Op. Petr. Plat. Puls.*  
*Rhus. Sabad. Sepiæ. Sil. Sulph.*  
*Zinc.*  
 —broth: *Arn. Ars. Belladonna.*  
*Graph. Rhus.*

—vegetables: **Hell.**  
 —coffee: *Bellad. Bry. Calc. Carbo*  
*veget. Cham. China. Coff. Dule.*  
*Lyc. Merc. Natr. mur. N. vom.*  
**Phosphor. Rhus. Sabad. Spig.**  
 —to milk: *Arn. Bell. Bryon. Calc.*  
*Carbo veg. Cina. Ign. Natr. c.*  
*Nux vom. Phosphor. Pulsat. Sep.*  
**Sil. Stann. Sulph.**  
 —sour things: *Beilad. Cocc. Ferr.*  
*Ign. Nux vom. Ph. ac. Sabad.*  
**Sulph.**  
 —salt things: *Carbo veg. Graph.*  
**Selen.**  
 —sweet things: *Ars. Caust. Graph.*  
*Merc. Nitr. ac. Phos. Sulph. Zinc.*  
 —to water: *Bellad. Brom. Bryon.*  
*Canth. Caust. China. Lyc. Natrum*  
*mur. N. vom. Stram.*  
 —to wine: *Ign. Lach. Merc. Rhus.*  
*Sabad. Sulphur.*

DESIRE FOR BEER: *Acon. Bry.*  
*Calc. Causticum. China. Cocc.*  
*Graph. Lach. Merc. Natr. c. N.*  
*vom. Op. Petr. Th. ac. Pulsat.*  
*Rhus. Sabad. Spig. Spong. Sulph.*  
*Zinc.*  
 —bitter things: *Dig. Natrum mur.*  
 —brandy: *Aco. Arg. Ars. Bov. Bry.*  
*Calc. China. Cic. Hep. Mur. ac. N.*  
*vom. Op. Puls. Selen. Sep. Spigel.*  
*Staph. Sulph. Sulph. ac.*  
 —bread: *Ars. Bell. Bov. Ferr. Hell.*  
*Ign. Natr. m. Plumb. Puls. Staph.*  
 —bread and butter: *Ferr. Ign. Merc.*  
 —something refreshing: *Carbo an.*  
**Caust. Cocc. Phosph. Ph. ac. Pulsat.**  
*Rheum. Valer.*

—for fat food: *Nitr. ac. Nux vom.*  
 —for meat: *Hell. Sulph.*  
 —liquids: *Ferr. Merc. Staph. Sulph.*  
 —pastry: *Plumb.*  
 —smoked things: *Caust.*  
 —vegetables: *Alum. Magnes. carb.*  
 —cucumbers: *Ant. crud. Veratr.*  
 —herrings: *Nitric ac. Veratr.*  
 —cheese: *Ign.*  
 —coffee: *Ars. Aur. Bryon. Capsicum.*  
*China. Colch. Con. Mosch. Selen.*  
 —chalk: *Nitr. ac. N. vom.*  
 —sweet things: *Amm. Calcar. Carbo*  
*veg. Chin. Ipec. Kali c. Lye. Natr. c.*  
*Nux vom. Petr. Rheum. Rhus.*  
*Sabad. Sulph.*  
 —farinaceous: *Sabad.*  
 —milk: *Anac. Ars. Aur. Bov. Bry.*  
*Calc. Chel. Mercur. Natr. mur. Nux*  
*vom. Ph. ac. Rhus. Sabad. Sabina.*  
*Sil. Staph.*  
 —fruit: *Alum. China. Ignat. Puls.*  
*Sulph. ac. Veratr.*  
 —juicy: *Ph. ac.*  
 —salt: *Calc. Carbo veg. Caust.*  
*Conium. Nitric acid. Phosph. Ve-*  
*ratr.*  
 —sour: *Antim. crud. Arn. Ars. Bry.*  
*C. an. Cham. China. Con. Dig. Hep.*  
*Ign. Kali c. Lach. Phosph. Puls.*  
*Sabin. Sec. corn. Sep. Stram.*  
*Sulph. Veratr.*  
 —wheat bread: *Aur.*  
 —warm food: *Cycl. Ferrum. Lye.*  
 —wine: *Aco. Arg. Bov. Bryon. Calc.*  
*Chin. Cic. Hep. Lach. Pulsat. Sep.*  
*Spigelia. Staph. Sulph.*  
**BAD EFFECTS OF FOOD OR**  
**DRINK: see Index.**

**HUNGER:** *Agar. Alum. Antim. crud.*  
*Arg. Ars. Aur. Bellad. Bryon.*  
*Calc. Canth. Carbo veg. Cham.*  
*China. Cina. Cocc. Coff. Graph.*  
*Hell. Hyosc. Ign. Lye. Merc. Mur.*  
*ac. Natr. mur. Nux vom. Op. Petr.*  
*Phosphor. Plat. Plumb. Puls. Rhus.*  
*Sabad. Secale corn. Sep. Sil.*  
*Spong. Staph. Veratr.*  
 —without appetite: *Ars. Bellad. Bry.*  
*Calc. Chin. Dulc. Hell. Ign. Lye.*  
*Natr. mur. Nux vom. Op. Puls.*  
*Rhus. Sil. Sulph. Veratr.*  
 —canine: *Ars. Bryon. Calc. Cham.*  
*Chin. Cina. Cocc. Graph. Hell. Hy-*  
*osc. Iodine. Lye. Natr. mur. N.*  
*vom. Op. Phosph. Puls. Rhus.*  
*Sep. Sil. Spig. Sulph. Veratr.*  
**THIRST:** *Acon. Ant. crud. Arn.*  
*Ars. Bell. Bryon. Calc. Canth.*  
*Carb. veg. Caust. Cham. Chin.*  
*Cina. Coffea. Crocus. Crotal. Cupr.*  
*Dros. Dulc. Ferr. Hep. Hyosc. Ign.*  
*Kali bichr. Merc. Natr. mur. Nux*  
*vom. Plumb. Rhus. Sec. cornut.*  
*Silic. Stram. Sulph. Veratr.*  
 —loss of: *Ambr. Apis. Arsen. Bellad.*  
*Camph. Canth. Chin. Con. Hell.*  
*Hep. Lycop. N. mosch. Oleand. Op.*  
*Ph. ac. Puls. Rhus. Sep. Spig.*  
*Spong. Staph.*  
 —with aversion to drinks: *Arn. Bell.*  
*Canth. Caust. Hyos. Lach. Lye.*  
*Natr. mur. Nux vom. Rhus. Samb.*  
*Stram.*  
 —none, but desire to drink: *Ars.*  
*Camph. Cocc. Coloc. Graph. Man-*  
*chu. Phosph.*

## X. TASTE.

**TASTE, bitter:** *Aconit. Alum. Ant.*  
*crud. Arg. Arn. Ars. Aur. Bar.*  
*Bell. Bov. Bry. Calcar. Canth.*

*Carb. veg. Cham. Chin. Cocc. Coff.*  
*Croc. Cupr. Dig. Glonoim. Hyosc.*  
*Ign. Ipec. Kali c. Lye. Merc. Mur.*

- ac. **Natr. mur. Nitr. ac. Nux vom.**  
**Op. Petr. Phosph. Pulsat. Rhododend. Rhus. Sabad. Sabin. Sec. corn. Sepiæ. Silic. Spong. Staph. Stram. Sulph. Veratr.**  
 —of food: **Ars. Bryon. Camph. Chin. Ferr. Hell. Hep. Ign. Ph. ac. Puls. Sabin. Staph. Stram.**  
 —of blood: **Alum. Ars. Canth. Ferr. Ipec. Kali carb. Rhus. Sabin. Zinc.**  
 —burnt: **Bryon. Cyclam. Laur. Puls. Scill. Sulph.**  
 —of pus: **Dros. Merc. Natr. carb. Puls.**  
 —nauseous: **Bry. Chel. N. vom. Puls. Valer.**  
 —earth: **Caps. Ferr. Hep. Merc. Puls.**  
 —flat: **Agar. Alum. Ant. crud. Ars. Asa f. Aur. Bell. Bry. Caps. Chin. Coloc. Dig. Dule. Euphorb. Ign. Ipec. Natr. mur. Op. Ph. ac. Puls. Rhus. Sec. corn. Stann. Staph.**  
 —foul: **Acon. Arn. Ars. Aur. Bellad. Bry. Cham. Con. Cupr. Ign. Kali carb. Lycop. Merc. Mur. ac. N. vom. Ph. ac. Puls. Rhus. Spig. Staph. Veratr.**  
 —of foul eggs: **Acon. Arn.**  
 —bilious: **Acon. Bry. Cham. Puls. Veratr.**  
 —of cheese: **Chin.**  
 —chalky: **Ign. Nux mosch.**
- insipid: **Acon. Alum. Ars. Bell. Bry. Caps. Chin. Euphras. Ign. Kali c. Op. Petr. Phosph. Sabin. Spig. Stann. Staph. Valer.**  
 —salt: **Alum. Ars. Bar. Bell. Calc. Carb. veg. Chin. Coff. Croc. Iod. Merc. Puls. Rhodod. Sulph.**  
 —sour: **Acon. Alum. Ars. Aur. Bar. Bell. Calc. Canth. Caps. C. an. Con. Chamom. Chin. Cocc. Crotal. Graph. Ignat. Kali c. Kali bichr. Lyc. Merc. Nitr. ac. Nux vom. Pyrocarb. Phosph. Puls. Rhus. Sep. Sil. Sulph.**  
 —slimy: **Alum. Arn. Arsen. Bell. Cham. Chin. Cocc. Dig. Hell. Hep. Lyc. Merc. Nux vom. Petr. Phosph. Ph. ac. Rhus. Sep. Sulph.**  
 —sweetish: **Alum. Aur. Bell. Bry. Canth. Chin. Coff. Croc. Cupr. Ferr. Kali c. Lyc. Merc. N. vom. Phosph. Plat. Plumb. Puls. Sabad. Spong. Sulph. Zinc.**  
 —offensive: **Ars. Brom. Bry. Calc. Canth. Chin. Cocc. Dros. Ign. Merc. Natr. mur. Nux vom. Phosph. Pulsat. Sep. Spig. Stann. Sulph. Zinc.**  
 —lost: **Alum. Anac. Ant. cr. Bell. Bry. Calc. Hyosc. Ipec. Kali c. Lyc. Merc. Natr. mur. Rhodod. Sec. corn. Sep. Silic. Stram. Sulph. Veratr.**

## XI. ERUCTATIONS.

- ERUCTATIONS, bitter: **Alum. Ar-nica. Ars. Bar. Bell. Bry. Cham. Chin. Calc. Carb. veg. Cocc. Droser. Hyosc. Ign. Kali carb. Lyc. Merc. Mur. ac. N. vom. Phosph. Pulsat. Sil. Spong. Stann. Sulph. Veratr.**  
 —foul: **Acon. Arn. Bellad. Brom. C. an. Cocc. Merc. Mur. ac. N. vom. Phosph. Puls. Sep. Sulph.**  
 —after eating: **Antim. crud. Bellad. Bry. Camph. Canth. Chin. Cina. Cocc. Coff. Crotal. Euphr. Ferr. Graph. Ign. Natr. mur. Phosph. Pulsat. Rhus. Sil. Sulph. Thuja.**  
 —bilious: **Arn. Bryon. Cocc. Dros.**



- N. vom. Puls. Spong. Veratr.  
 —hot: Mancin.  
 —spasmodic: Ferr. Nux vom. Phosph. Ruta.  
 —loud: Ant. crud. Caust. Con. Kali c. Petr. Phosph. Plat. Puls.  
 —empty: Acon. Agar. Alum.  
 Ambr. Ant. crud. Arn. Ars. Bar. Bell. Bryon. Calc. Cann. Canthar. Carb. veg. Caust. Coloc. Con. Chamom. China. Coce. Coff. Colchie. Croc. Dule. Euphorb. Graphit. Hell. Iod. Ign. Ipec. Kali c. Lyc. Merc. Millefol. Natr. mur. N. vom. Phosphor. Plumb. Plat. Rhus. Ruta. Sabad. Sabin. Sep. Sil. Spig. Spong. Staphis. Veratr.  
 —sour: Ambr. Arsen. Bar. Bell. Bry.
- Calcar. Carb. veg. Cham. Chin. Con. Dros. Dig. Graph. Ignat. Kali c. Kali bichr. Lyc. Mercur. Natr. mur. N. vom. Op. Posph. Puls. Sabin. Sil. Stamm. Sulph. Sulph. ac. Zinc.  
 —fetid: Bism. Coce. Merc. N. vom. Sulph. Thuja.  
 —incomplete: Arn. Bell. Canth. Cina. Coce. Con. Hyosc. Millefol. Natr. mur. Ph. ac. Rhus. Sabad.  
 —suppressed: Aconit. Alum. Ambr. Bar. Bell. Calc. Canthar. Caustic. C. an. Coce. Con. Hyosc. Ign. Kali carb. N. vom. Phosph. Plat. Plumb. Puls. Sulph.  
 —repulsive: Asa f. Cina. Nat. mur. Ph. ac. Plumb.

## XII. HEARTBURN, REGURGITATION.

- HEARTBURN: Agaricus. Alumina. Ambr. Ant. crud. Arg. Arn. Bar. Bell. Calc. Capsic. Carbo veg. Caust. Cham. Chin. Croc. Crotal. Con. Dig. Dule. Ferr. Graph. Iod. Ign. Lyc. Merc. Natrum mur. N. vom. Petr.  
 REGURGITATION, bitter: Arnica. Bar. Bry. Dros. Ign. Nux vom. Phosph. Puls. Rhod.  
 —of blood: Canth. Chin. Merc. N. vom.  
 —salt: Arn. Lyc. Veratr.  
 —sour: Alum. Calc. Con. Dros. Nux vom. Petr. Plumb. Puls. Rhus. Sabin. Spong. Zinc.  
 —of food: Antim. crud. Arnica. Bell. Bry. Camph. Canth. Carbo veget. Cham. Dule. Ferr. Ign. Lyc. Merc. Nux vom. Phosph. Plumb. Puls. Sep. Sulph.  
 —of water: Aco. Arg. Arn. Bar. Bryon. Cann. Caust. Cina. Hep.
- Kali c. Merc. Nux vom. Petr. Phosph. Plumb. Puls. Sulph. ac.  
 RISING: Alumina. Bellad. Calc. Chin. Phosph. Pulsat. Rhus. Sabad. Stann.  
 —hot: Asa f. Canth. Carbo veg. Cic. Coffea. Croc. Dule. Hell. Merc. Nux vom. Plat.  
 —cold: Veratr.  
 —sweet: Aco. Chin. Plat. Merc. Stann.  
 —burning: Arsenic. Bov. Calc. Carbo veget. Croc. Hep. Hell. Lyc. Nux vom. Phosph. Sabina. Secale corn. Sep. Sil. Staph. Sulph. Thuja. Verat. Zinc.  
 WATER-BRASH, bitter: Chelidon. Graph. Nux mosch. Sulph.  
 —sour: Bell. Calc. C. an. Con. Natrum c. Sulph.  
 —general: Ant. crud. Arsenic. Bry. Carbo veg. Chin. Cina. Coce.

Graph. Hell. Ign. Kali c. Lye.  
 Merc. Nux vom. Staph. Sulph.  
 —more fully: Aco. Alum. Ars. Bar.  
 Bryo. Calc. Canth. Carbo veg.  
 Caustic. Cic. Cina. Cocc. Dros.  
 Ferr. Hep. Ign. Kali c. Lye. Natr.  
 mur. Nitr. ac. *Nux vom.* Petr.  
 Phos. Puls. Sabad. Sep. Sil. Spig.  
 Staph. Sulphur. Veratr.  
 —with shuddering: Sil.

—with hiccup: Aconit. Agar. Alum.  
 Ant. crud. Arg. Ars. Asar. Bar.  
 Bell. Bov. Bry. Calc. Cann. Canth.  
 Carbo veg. Causticum. Cham. Cic.  
 Cina. Cocc. Coff. Colchicum. Con.  
 Cupr. Dig. Dros. Dulcam. Euphr.  
 Euphorb. Graph. Iod. Kali c.  
 Merc. Natr. mur. N. vom. Op.  
 Phosph. Pulsat. Samb. Sep. Spong.  
 Staph. Stram. Sulph. Veratr.

### XIII. NAUSEA, VOMITING.

LOATHING: Aco. Ant. crud. Arg.  
 Arn. Asar. Bar. Bell. Bry. Canth.  
 Cham. Chin. Cocc. Colch. Cupr.  
 Digit. Dulc. Ferr. Hep. Ign. Ipec.  
 Kali c. Merc. Nux vom. Op.  
 Phosph. Plumb. Puls. Rhod. Se-  
 cale corn. Sep. Sil. Spigel. Stram.  
 Sulph. ac.

LAUSIA, generally: Aco. Alum.  
 Ant. crud. Arg. Arn. Ars. Bell.  
 Bry. Calc. Cann. Carbo veg. Caus-  
 tic. Cham. China. Cocc. Coff. Con.  
 Croc. Cupr. Dig. Dros. Dule.  
 Glonoin. Hep. Ign. Ipec. Kali c.  
 Lye. Mosch. Mercur. Mancin. Natr.  
 mur. Nux vom. Petr. Phosph. Ph.  
 ac. Puls. Rhus. Ruta. Sabad. Sep.  
 Sil. Staph. Sulph. Veratr.

—in the chest: Aco. Bry. C. ac.  
 Merc. Nux vom. Rhus. Sec. corn.  
 Staph.

—in the throat: Aco. Ars. Bell.  
 China. Cocc. Coffea. Cupr. Cycl.  
 Ferr. Merc. Ph. ac. Puls. Rhus.  
 Spig. Stam. Staph. Sulph. Valer.

—in the stomach: Aconit. Arn. Asar.  
 Calc. Cann. Cantharis. Cham. Chin.  
 Cic. Cocc. Croc. Cupr. Hell. Ipec.  
 Kali carb. Lye. Merc. Natr. mur.

Nux vom. Phosphor. Puls. Rhus.  
 Sil. Sulph. Veratr.

—in the abdomen: Bell. Bry. Cocc.  
 Cupr. Hell. Hep. Puls. Rheum.  
 Samb. Sil. Staph.

QUALMISHNESS: Aco. Arnica.  
 Ars. Bar. Bellad. Bry. Calc. Caps.  
 Carbo veg. Caustic. Cham. China.  
 Cina. Coffea. Croc. Digit. Euphr.  
 Hep. Ign. Ipec. Kali c. Lye. Natr. c.  
 Nitr. ac. Nux vom. Petrol. Phos-  
 phor. Plat. Pulsat. Rhus. Sabad.  
 Sil. Staph. Sulph. Thuja. Veratr.  
 Zine.

REICHING: Aco. Ant. crud. Arg.  
 Arn. Ars. Asar. Bell. Bryon. Canth.  
 Chin. Cocc. Cupr. Dig. Dule.  
 Glonoin. Hyosc. Ipec. Lye. Natrum.  
 mur. Plumb. Pulsat. Sabin. Secale  
 corn. Sulph. Veratr.

VOMIT, inclination to: Acon. Ant.  
 crud. Arg. Arn. Ars. Aur. Asar.  
 Bell. Bryon. Cann. Canth. C. veg.  
 Cham. China. Cocc. Coffea. Croc.  
 Cupr. Dig. Ferr. Graph. Hep.  
 Hyosc. Hell. Ign. Iod. Ipec. Kali  
 bichr. Lye. Merc. Mur. ac. N. vom.  
 Op. Plat. Plumb. Puls. Pyro carb.  
 Rhus. Sabina. Secale corn. Sep.

- Sil. Spig. Spong. Staph. Stram. Sulph. Thuj. Veratrum.*
- anxious: *Aco. Calc. Caustic. Kali c. Lach. Lyc. Nitrum ac. Plumb. Sabad.*
- VOMITING, generally: *Antim. crud. Arg. Arn. Arsen. Asar. Bar. Bell. Bryon. Calc. Camph. Cann. Canthar. Caps. Cham. Chin. Cina. Cocc. Coffea. Colch. Con. Cupr. Dig. Dros. Dule. Euphorb. Ferr. Graph. Hell. Hep. Hyosc. Ipec. Iodine. Kali c. Lach. Lyc. Mercur. N. vom. Phosph. Ph. ac. Op. Plumb. Puls. Ruta. Sabin. Sec. corn. Sep. Sil. Sulph. Veratr. Zinc.*
- bitter: *Bryo. Cann. Canth. Cham. Chin. Cocc. Cupr. Ipec. Sec. corn. Sep. Sil. Sulph. Thuj. Veratr.*
- bloody: *Aco. Arn. Arsenic. Bry. Camph. Cann. Canth. Chin. Cupr. Dros. Ferr. Hyosc. Ipec. Lyc. Nux vom. Op. Plumb. Pulsat. Rhus. Sepiæ. Stann. Veratr. Zinc.*
- of brown substance: *Arsenic. Bism.*
- bilious: *Acon. Ant. crudum. Ars. Bell. Bism. Bryo. Camph. Cann. Canth. Cham. Colch. Con. Cupr. Dig. Dros. Dule. Hyosc. Ipec. Iodine. Kali bichr. Lyc. Merc. Natr. mur. N. vom. Phosph. Puls. Sab. Sec. corn. Sep. Sil. Stann. Stram. Veratr. Zinc.*
- yellow: *Arsen. Bryon. Cann. Colchic. Iod. Ipec. Plumbum. Veratr.*
- yellow-green: *Arsen. Bryon. Dule. Ipec. Veratr.*
- of drinks: *Ant. crud. Dule. Ipec.*
- green: *Aco. Ars. Asar. Bry. Cann. Chamom. Crotal. Cupr. Digitalis. Hell. Hep. Hyosc. Ign. Ipec. N. vom. Op. Plumb. Pulsat. Stram. Veratr.*
- violent: *Cupr. Ipec. Veratr.*
- green-blackish: *Plumb. Petr. Phosph.*
- of urine: *Op.*
- of feces: *Bry. N. vom. Op. Plumb.*
- sour: *Ars. Asar. Bellad. Calc. Caust. Cham. Chin. Cocc. Ferr. Graphites. Hep. Ipec. Lyc. Nux vom. Op. Phosph. Psorin. Pulsat. Sabin. Secale cornut. Stann. Stram. Sulph. Veratr.*
- frothy: *Veratr.*
- of mucus: *Acon. Ant. crud. Ars. Bar. Bell. Bry. Cann. Cham. Chin. Cocc. Cupr. Dig. Dule. Ferr. Graphit. Hep. Hyosc. Ign. Ipec. Lyc. Merc. N. vom. Pulsat. Phosph. Sec. cornut. Sil. Stram. Sulph. Veratr.*
- of food: *Antim. crud. Arn. Ars. Bell. Bryon. Calc. Canth. Chamom. Chin. Cina. Cocc. Coffea. Coloc. Dig. Dros. Ferr. Graphites. Hyosc. Ign. Ipec. Kali bichr. Kali c. Lach. Lycop. Merc. N. vom. Op. Phos. ac. Plumb. Puls. Pyro carb. Sabin. Sep. Sil. Stan. Sulph. Veratr.*
- fetid: *Cupr. Ipec. Plumb. Sec. corn. Veratr.*
- watery: *Asar. Bry. Cannab. China. Cupr. Dros. Ferr. Hyosc. Ipec. Pulsat. Stram. Veratr.*
- black: *Ars. Calc. Camphora. Chin. Hep. Ipec. Lyc. Mancin. Nux vom. Op. Petr. Phosph. Plumb. Secale corn. Stram. Sulph. Sulph. ac. Veratr.*
- of worms: *Aco. Anac. Ars. Cina. Coff. Ferr. Hyoscyam. Merc. Natrum mur. Sabad. Secale corn. Sil. Spigelia. Veratr.*

# XIV. STOMACH AND PIT OF STOMACH.

## 1. Stomach.

ACIDITY: Con. Graph. Sil. *Sulph. acid.* Zinc.

AS IF BLOATED: Alum. Bellad. Bov. Chin. Con. Croc. Dule. Ferr. Hell. Iod. Kali bich. Lye. Nitr. ac. *Nux mosch.* Op. Petr. Phosph. Sab. Stann. Zinc.

BURNING: Acon. Ambr. Arg. Ars. Asa f. Bar. Bell. Bry. Calad. Calcar. Camph. Canth. Caps. Carb. veg. Chin. Cic. Coleh. Con. Croc. Digit. Euphorb. *Graphit.* Ignat. Iod. Nux vom. Petr. *Phosph.* Phosph. ac. Sabad. Sec. cornut. Sep. Sil. Sulph.

—at the pylorus: N. vom.

CANCER: Ars. Lye. N. vom.

—as if something alive in it: Croc.

COLD: Ars. N. vom. Puls. Veratr.

COLDNESS: Alum. Arsen. Bar. Caps. Con. Graph. Ign. Natr. mur. *Phosph.* Sabad. Sulph. *Sulph. ac.*

CONSTRICTION: Aco. Alum. Bry. Bellad. Calc. Carb. veg. Chin. Con. Cocc. Euphorb. Lycop. Nux vom. Phosph. Plumb. Sil. Sulph.

CONTRACTION OF PYLORUS: Ars. Euphorb. Ign. Nitr. ac. Nux vom. Phosph. Zinc.

CRAMP: Ars. Ambr. *Ant. crud.* Arn. Asa fet. Bar. Bellad. Brom. Bry. Calc. Carb. veg. Caust. Chamom. Chin. Cocc. Con. *Cupr.* Dig. Euphorb. Ferr. Hyosc. Iod. Ign. Ipec. Kali carb. Lye. Merc. Natr. c. Natr. mur. N. vom. Petr. Phosphor. Plumb. Puls. Psorin. Sabad. Sec. corn. Seneg. Sep. Sil. Stann. Staph. Sulph. *Sulphur. acid.* Thuja. Valer. Veratr.

CRAMPY PAINS: Arn. Caust. *Euphorb.* Ign. Kali carb. Nux vom. Puls.

CUTTING: Alum. *Antim. cr.* Ars. Asa f. Calc. Cann. Canth. Chel. Digit. Kali carb. Petr. Phosph. Stann. Sulph.

EMPTY FEELING: Alum. Bar. Bry. Carbo veg. Caust. Chin. Dig. Graph. Ign. Ipec. Iod. Kali c. Kali bichr. Lye. Mur. ac. Natr. mur. N. vom. Petr. Phosph. Platin. Plumb. Rhus. *Sep. Veratr.*

FLATULENCE, feeling of: Arnica. Ars. Croc. N. mosch.

FULLNESS, feeling of: Aco. Alum. Arn. Asa f. Asar. Bar. Bov. Calc. Canth. Carb. veg. Cham. Chin. Cocc. Ferr. Hell. Iod. Kali c. Ign. Lach. Lye. Merc. N. vom. Opium. Petr. Phosphor. Puls. Rhus. *Sabina.* Sepiæ. Silicea. Stann. Sulph. *Sulph. ac.* Valer.

GRIPING: Caustic. *Euphorb.* Graph. Natr. carb. Phosph. Sil. Stann.

HEAT: Aco. Ars. Camph. Canth. Cocc. Con. Digit. Euphorb. Mur. ac. Plumb. Phos. Sulph.

INFLAMMATION: Aco. Ant. cr. Arsen. Bell. Bry. Canth. Chin. Cic. Colchic. Hyosc. Ipec. Nux vom. Phosph. Plumb. Puls. Sabad. Sec. cor. Stram. Veratr.

MOVEMENTS: Cocc. Cupr. Iod.

PINCHING: Argent. Arn. Asar. Bry. Canthar. Con. Croc. Dulcam. Hell. Nitr. ac. Rhus. Sep. Stann. Sulph.

PRESSURE: Acon. Agar. Ambr. Ant. crud. Arn. Anac. Asa fet. Asar. Ars. Bar. Bell. Bov. Bryon. Calc. Canth. Carb. v. Caust. Cham. Chin. Cic. Cocc. Coloc. Con. Crotal. Cupr. Dig. Ferr. Hell. Hep. Ign. Ipec. Iod. Kali c. Lye. Mercur.



- Mur. ac. Natr. mur. Nux vom. Op.  
 Petr. Phosph. Ph. ac. Plat. Plumb.  
 Puls. Rhus. Sabin. Sec. corn. Sep.  
 Spigel. Spong. Staph. Stram. Sil.  
 Stann. Sulph. *Veratr.*
- PRESSURE AS FROM A STONE:  
 Aco. Alum. Arn. *Ars.* Bar. *Bry.*  
 Calc. Carbo veget. Cham. Dig.  
 Ferr. Kali c. Merc. N. vom. Op.  
 Puls. *Sepiæ.* Sil. Staph. Sulph.
- RUMBLING: Arn. Arsen. Croc.  
 Graph. Kali c. Natr. c. Phos. Ph.  
 ac. Sep. Stann. Zinc.
- TEARING: Arn. *Ars.* Puls.
- WEAK DIGESTION: Bar. Bryon.  
 Calc. Canth. Carbo an. Caust. Con.  
 Chin. Cuprum. Dig. Graph. Hyosc.  
 Ign. Lyc. Merc. Natr. c. N. vom.  
 Op. Petr. Phosph. Pulsat. Ruta.  
 Valer. *Veratr.* Zinc.
- WRENCHING: Arn. Calc. Carbo  
 veg. Caust. Chin. Cocc. Lyc. N.  
 vom. Petr. Phosph. Puls. Sulph.  
 Sulph. ac.
- 
- ## 2. Pit of Stomach.
- ANXIETY: *Ars.* *Bry.* *Calcareæ.*  
*Cann.* Canth. Cham. Chin. Cic.  
 Con. *Ferr.* Ign. *Mercur.* N. vom.  
 Pulsat. *Sabad.* Sabina. Sec. corn.  
 Stram. Stann. Sulph.
- BURNING: Ambr. Ant. erudum.  
 Arg. *Ars.* *Bry.* Caps. Cham. Kali  
 bichro. Mancin. *Merc.* Natr. mur.  
 Nux vom. Phosphor. Pyro carb.  
 Sec. corn. Sep. Sil. *Veratrum.*  
 Zinc.
- CONSTRICTION: Agar. Alumina.  
 Asar. Calc. Carbo veg. Digit. Dros.  
 Kali c. Merc. Natrum mur. Plat.  
 Rhus. Sulph. Zinc.
- CRAMP: Hyosc. Kali c. Nitric ac.  
 Phosph.
- CUTTING: Anac. Bellad. *Bryon.*  
*Cann.* Digit. Kali c. *Mercur.* Nitr.  
 Phosphor. Sulphur. Valer.
- DIGGING: *Arn.* *Chin.* Cina. Kali c.  
 Natr. mur. Phos. *Sabad.* Sulph.
- GNAWING: Glonoin.
- OPPRESSION: *Ars.* Ant. erudum.  
 Bell. *Bry.* China. Cocc. Hyosc.  
 Platina. Plumb. Rhus. Sec. corn.  
 Staph.
- PRESSURE: Acon. Anac. Arn. *Ars.*  
 Asar. Aur. Bar. Bellad. *Bry.* *Caps.*  
 Carbo veget. Caust. Cham. China.  
 Cocc. *Cupr.* Dig. Graphites. Hell.  
 Hyosc. Ign. *Ipec.* Kali c. Lyc.  
 Merc. N. vom. Natrum mur. Petr.  
 Phosph. Plat. Puls. *Rhod.* *Rhus.*  
 Sec. corn. Sep. *Spig.* Stann. *Staph.*  
 Sulphur. Valer. *Veratr.*
- PULSATIONS: Asa f. Cann. Cic  
 Iod. Merc. Puls. Rhus. Thuja.
- SENSITIVENESS. Alumina. Arn.  
*Bry.* Camph. Canth. Carbo vege-  
 tabilis. Cupr. Ferr. Hell. Hyosc.  
 Kali c. *Natrum c.* Nux vom. Sec.  
 cornut. Spong. Stann. *Veratr.*
- STITCHES: Aconit. *Anac.* Arn.  
 Bar. Bell. Bryon. Calad. Canth.  
 Caps. Chel. *China.* Cocc. Coff.  
 Cupr. Dig. Dule. Euphr. Graphit.  
 Ign. Iodine. *Ipec.* Kali c. Natrum  
 mur. Phosph. Plat. Plumb. Puls.  
*Rhus.* *Sabin.* Sep. Sil. *Spig.* Staph.  
 Stann. Sulph. Zinc.
- SWEAT: Bell. Nux vom. Secale  
 corn.
- SWELLING: *Ars.* Aur. Bellad.  
 Bryon. Calc. Cham. Cic. Coff. Ferr.  
 Hell. Kali c. Lyc. N. vom. Natr.  
 mur. Op. Sabina.
- THROBBING: Arn. *Ars.* Asa f.  
 Bell. Cann. Carbo veg. Cham. Cic.  
 Dros. Ferr. *Ipec.* Phos. Puls.  
 Rhus. Sep. *Sulph.*
- TENSION: Acon. Anac. Arsenic.  
*Bry.* Cham. Cocc. Dros. Dule. Hep  
 Kali c. Lycop. *Mercur.* Pulsat.  
 Phosphor. *Rheum.* Sabin. Staphy-  
 sag. Stann. Sulph. *Veratr.*

## XV. HYPOCHONDRIA.

(*L.* Signifies region of the liver; *S.* region of spleen; *B.* both sides.)

**BURNING :** *Aco.* Alum. Bryon.  
*Crotal.* Ign. Mur. ac. Phosph.  
 Phosph. ac. Plat. Secale corn.  
 Sulph.  
 —*S.*: Cann. Chel. Graph. *Ign.* Seneg.  
 Spig.  
 —*B.*: Laur. Kali carb. Mercur.  
 Sulph.  
**CONSTRICTION,** *L.*: *Aco.* Asa f.  
 Asar. *Dros.* Ign.  
**DISTENTION,** *L.*: Arn. Bryon. Lye.  
 Merc. Sep.  
 —*S.*: Mere. Natr. c. Nitr. ac.  
 —*B.*: Calc. Cham. *Ign.*  
**FLATULENCE:** Cham. Chin.  
 Coleh. Ign. *Nux vom.* Puls. Veratr.  
**HARDNESS,** *L.*: Arn. Bryon. Calc.  
 Cann. Graph. Merc. Mur. magn.  
 —*S.*: Iod.  
**INFLAMMATION,** *L.*: *Aco.* Bell.  
 Bry. Canth. Cham. Cocce. Ignat.  
 Merc. Nux vom. Puls. *Sec. corn.*  
 —*S.*: Acon. Ars. Dros. Ferr. *N. vom.*  
 Plumb.  
 —*B.*: *Aco.* Canth. *Nux vom.*  
**PRESSURE,** *L.*: *Aco.* Ambr. Arn.  
 Ars. Asa f. Bar. Calc. Carbo veg.  
 Camphor. Chamom. Chin. Cocce.  
 Con. Graph. *Ign.* Iodine. Kali c.  
*Lycop.* Merc. Mur. magn. Natr.  
 mur. *N. vom.* Petr. Phosph. Ruta.  
 Sabad. Sabina. Sepiæ. *Stann.*  
 Staph. Sulph. Veratr. Zinc.  
 —*S.*: Alum. Arn. Asa f. Bell. Camph.  
 Cann. Chin. Con. *Ign.* Lycop.

Mur. ac. Natrum mur. Petr. Plat.  
 Rheum. Rhodod. Rhus. Sassap.  
 Sepiæ. *Stann.* Zinc.  
 —*B.*: *Aco.* Alum. Arn. Asa f. Camph.  
 Caps. Cham. Chin. Cocce. Con. *Ign.*  
*N. vom.* Ph. ac. Rhodod. Sec. corn.  
 Spong. Staph. Veratr. Zinc.  
**STITCHES,** *L.*: *Aco.* Agar. Alum.  
 Arn. Asa f. Bell. Bov. Bry. Calc.  
 Camph. Canth. Carbo veget. Caust.  
 Chin. Cocce. Con. Dule. Graphites.  
 Hyosc. Ipec. Iod. Kali c. Laur.  
 Lye. Merc. Mosch. Mur. ac. Natr. c.  
*N. vom.* Phosphor. Platina.  
 Plumb. Psorin. Rhus. Sep. Sil.  
 Sabad. Spig. Spong. Sulph. Zinc.  
 —*S.*: *Aco.* Agar. Arn. Arsen. Aur.  
 Bar. Bry. Caust. Chin. Glonoin.  
 Hep. Ignat. Ipec. Mur. ac. Na-  
 trum mur. Ph. ac. Plumb. Rhodod.  
 Selen. Spig. Sil. Sulph.  
**SWELLING,** *L.*: Cann. China. *N.*  
 mosch.  
 —*S.*: Ign. *N. mosch.* Ruta.  
 —*B.*: *Aco.* Alum. Arn. Arsenic. Bry.  
 Canth. Chin. Ferr. Ipec. Phosph.  
 Plumb. Pulsat. Sil. Spig.  
**TENSION,** *L.*: Ars. Brom. Bry. Calc.  
 Carbo veg. Causticum. Ferr. Lye.  
*N. vom.* Sulph. Veratr.  
 —*S.*: Camph. Con. Merc. Rhus. Zinc.  
 —*B.*: *Aco.* Ant. crud. Asa f. Calc.  
 Cham. Chin. Conium. Ferr. Hell.  
 Lye. *N. Vom.* Op. Puls. Staph.  
 Veratr.  
**WARMTH,** feeling of: Sabad.

## XVI. ABDOMEN.

### Sensations.

**ALIVE,** as of something: Cann.  
 Croc. Hyosc. Ign. Merc. Plumb.  
 Spong. Thuj.  
**BALL,** ascending: Acon. Ignatia.  
 Plumb.

**BLOATING:** Acon. Alum. Am-  
 bra. Antim. crud. Arg. Arn. Ars.  
 Asa f. Aur. Bar. Bell. Bry. Calc.  
 Canth. Capsicum. Carbo an. Carbo  
 vegetab. Caust. Cham. Chin. Cic.  
 Cina. Cocce. Coloc. Con. Croc. Cupr.

Dulc. *Euphorbium*. *Euphr.* *Ferr.*  
*Graphit.* *Hell.* *Hep.* *Hyosc.* *Iod.*  
*Ign.* *Ipec.* *Kali c.* *Lachesis.* *Lyc.*  
*Merc.* *Mur.* *ac.* *Natr.* *mur.* *N. vom.*  
*Op.* *Petr.* *Phosph.* *Phos.* *ac.* *Plati-*  
*na.* *Plumb.* *Pulsat.* *Rheum.* *Rhod.*  
*Rhus.* *Ruta.* *Sabina.* *Sec.* *cornut.*  
*Sep.* *Sil.* *Spigel.* *Spong.* *Stannum.*  
*Staph.* *Stram.* *Sulphur.* *Thuj.*  
*Valer.* *Veratrum.* *Zinc.*

BOUNDING, as of something.  
*Croc.*

BRUISING PAIN: *Asa foet.* *Aur.*  
*Camph.* *Cann.* *Cina.* *Coccul.*  
*Coloc.* *Con.* (*Ferr.*) *Hell.* *Hep.* *s. c.*  
*Ign.* *Nux vom.* *Op.* *Phos.* *Pulsatilla.*  
*Samb.* *Sep.* *Staph.* *Stram.*  
*Sulph.* *Valer.* *Verat.*

BURNING: *Aco.* *Alum.* (*Ambr.*)  
*Arg.* *Arn.* *Ars.* *Asa f.* *Bell.* *Bry.*  
*Camph.* *Canth.* *Caps.* *Carbo*  
*vegetab.* *Caust.* *Cham.* *Coccul.*  
*Coloc.* *Cuprum.* *Euphorb.* *Euphr.*  
*Graphites.* *Ipec.* *Kali c.* *Laches.*  
*Merc.* *N. vom.* *Phosph.* *acid.* *Plat.*  
*Plumb.* (*Puls.*) *Rhus.* *Sabad.*  
*Sabin.* *Sec.* *cornut.* *Sep.* *Sil.*  
*Spigelia.* *Spong.* *Stann.* (*Thuj.*)  
*Veratr.*

COLDNESS: *Alum.* *Ambr.* *Ars.*  
*Kali c.* *Merc.* *Phos.* *Plumb.* *Ruta.*  
*Secale cornut.* *Sulphur.* *Zinc.*

CLOTHES TOO TIGHT, as if the:  
*Nux vom.*

CRAMPY FEELING: *Ambr.* *Arsen.*  
*Carbo veget.* *Coccul.* *Coloc.* *Con.*  
*Graph.* *Phosph.* *Ph. ac.*

COLIC: *Aco.* *Alum.* *Arn.* *Arsen.*  
*Asa f.* *Aur.* *Bar.* *Bry.* *Camphora.*  
*Cann.* *Canth.* *Cham.* *Chin.* *Cocc.*  
*Coff.* *Coloc.* *Con.* *Cupr.* *Digit.*  
*Euphorb.* *Ferr.* *Hell.* *Hep.* *sulph.*  
*Hyosc.* *Ign.* *Iod.* *Kali c.* *Mur.* *ac.*  
*N. vom.* *Op.* *Plumbum.* *Puls.* *Ruta.*  
*Secale corn.* *Staph.* *Stram.* *Veratr.*

CONTRACTION: *Arg.* *Aur.* *Bell.*

*Calc.* *Carbo an.* *Carbo veget.*  
*China.* *Coccul.* *Coloc.* *Con.* *Dig.*  
*Euphorbium.* *Ferr.* *Graph.* *Hep.*  
*sulph.* *Ignatia.* *Ipec.* *Kali c.* *Lach.*  
*Lycop.* *Nitric acid.* *N. vom.* *Petr.*  
*Phosphor.* *Ph. ac.* *Platina.* *Plumb.*  
*Rheum.* *Rhus.* *Sabad.* *Sabin.* *Sec.*  
*corn.* *Sep.* *Spig.* *Sulph.* *Thuj.*

CRAMPS: *Alum.* *Ambr.* *Arsen.*  
*Aur.* *Bell.* *Bryon.* *Caustic.* *Chamom.*  
*Chin.* *Coccul.* *Coff.* *Con.* *Cupr.*  
*Digitalis.* *Euphorb.* *Ferr.* *Hep.*  
*sulph.* *Hyosc.* *Ign.* *Ipec.* *Iodine.*  
*Kali c.* *Mosch.* *Mur.* *ac.* *N. vom.*  
*Plumb.* *Pulsat.* *Rhus.* *Sec.* *corn.*  
*Spong.* *Stann.* *Staph.* *Stramon.*  
*Thuj.* *Valer.* *Veratr.*

CREEPING: *Asa f.* *Carbo veget.*  
*Caust.* *Chin.* *Plat.* *Stann.* *Zinc.*

CUTTING: *Alum.* *Ambra.* *Ant.*  
*crud.* *Arg.* *Arn.* *Ars.* *Asa f.* *Bar.*  
*(Bell.) Bryon.* *Calc.* *Camph.* *Canth.*  
*Carbo an.* *Carbo veg.* *Caust.* *Cham.*  
*Chin.* *Cina.* *Coccul.* *Coff.* *Coloc.*  
*Con.* *Croc.* *Cupr.* *Dig.* *Dros.* *Dule.*  
*Graph.* *Hep.* *sulph.* *Hyosc.* *Ignat.*  
*Ipec.* *Iod.* *Lach.* *Lyc.* *Merc.* *Mur.*  
*ac.* *Natr.* *mur.* *Nitr.* *ac.* *N. vom.*  
*Op.* *Petr.* *Phosph.* *Ph. ac.* *Plat.*  
*Plumb.* *Puls.* *Rheum.* *Rhus.* *Sabad.*  
*Sabin.* *Selen.* *Sepiæ.* *Sil.* *Spig.*  
*Spong.* *Staph.* *Sulphur.* *Valer.*  
*Verat.* *Zinc.*

DIGGING: *Alum.* *Arn.* *Ars.* *Asa f.*  
*Bell.* *Calc.* *Cina.* *Coloc.* *Con.* *Dig.*  
*Dule.* *Graph.* *Kali c.* *Phosph.*  
*Phosph.* *ac.* *Rheum.* *Rhod.* *Rhus.*  
*Sabadilla.* *Sep.* *Spig.* *Spong.*  
*Stann.* *Valer.*

DRAWING: *Aco.* *Ars.* *Asa foet.*  
*Bar.* *Bry.* *Calc.* *Camph.* *Cann.*  
*Caps.* *Carbo veget.* *Chamom.*  
*Chin.* *Cic.* *Coccul.* *Conium.* *Cupr.*  
*Dros.* *Graph.* *Hep.* *s. c.* *Hyosc.* *Ign.*  
*Iod.* *Lyc.* *Nitrum ac.* *N. vom.* *Op.*  
*Plat.* *Plumb.* *Puls.* *Rheum.* *Rho-*  
*dod.* *Rhus.* *Ruta.* *Sabin.* *Sep.*

- Spig. Stann. *Staph.* Stramon.  
Thuj. Valer. *Veratr.*
- DROPSY:** *Acon.* Ambr. Arn. Ars.  
Bry. Camph. Canth. China. Dule.  
Ferr. Hell. Kali c. Lye. Mere.  
*Nux vom.* Spong.
- DYSENTERIC PAIN:** Arn. Bryon.  
Rhus.
- EMPTY FEELING:** Ant. crudum.  
Arn. Carbo veg. Caust. Cham.  
Cina. Coec. Coloc. Croc. Dule.  
Euphorb. Kali c. Lach. Merc. Mur.  
ac. N. vom. Phosphor. Pulsat.  
Rhus. Sabad. Sep. Stann. Zinc.
- FLATULENCE,** moving about:  
Ant. crud. Bell. Bry. Cann. Canth.  
Caps. Carbo an. Caust. Chin. Cina.  
Coff. Croc. Dig. Euphorb. Hell.  
Hep sulph. N. vom. Plat. *Plumb.*  
Pulsat. Sabad. Stann. Staph.  
Sulph.
- FULLNESS:** Alum. Ant. crudum.  
Arn. Ars. Asa f. Aur. Bar. Calc.  
Camph. Cann. Canth. Cham.  
China. Cic. Coffea. Coloc. Con.  
Croc. Dig. Ferr. Graph. Hell.  
Hyosc. Ignatia. Kali c. Lye. Mur.  
ac. Natrum mur. N. vom. Phosph.  
Phos. ac. Plat. Plumbum. Pulsat.  
Rheum. Rhod. Rhus. Sil. Spig.  
Spong. Stann. Sulphur. Thuj.  
Valer. Zinc.
- GURGLING:** Alum. Ambr. Asa f.  
Carbo veg. Cham. Croc. Dig.  
Graph. Hell. Lye. Mere. Nux  
vom. Ph. ac. Plat. Plumbum. Sep.  
Stann. Valer. Zinc.
- GRIPING:** Aconit. Bell. Cham.  
Coloc. Con. Hep. s. Ipec. N. vom.  
Phosph. Pulsat. Sil. Stann.
- colicky: Bry. Canth. Euphorb.  
*Plumb.* Ruta. Sil.
- HARDNESS:** Alum. Ars. Bellad.  
Calc. Caps. Caustic. Cham. China.  
Coloc. Con. Cupr. Ferr. Graphit.  
Hep. sulph. Hyosc. Kali c. Mere.
- Phosph. *Plumb.* Puls. Sec. corn.  
Sep. Sil. Sulphur. Valer. *Veratr.*
- HEAT:** Bellad. Bryon. Calcareae.  
Camph. Canth. Carb. an. Carbo  
veg. Cic. Cina. Digit. Euphorb.  
Graph. Ipec. Lye. Phosphor.  
*Plumb.* Ruta. Sil. Spong. Stann.  
Sulph. Zinc.
- HEAVINESS:** Ambr. Asa f. Aur.  
Bell. Camph. Ferr. Graph. Hell.  
(Ipec.) Mere. N. vom. Op. Puls.  
Rhod. Rhus. Sec. corn. Sep.  
Staph.
- INACTIVITY:** Champhor. Cham-  
om. Kali c. Nux vom. Op. Staph.
- INDURATIONS:** China. Lycop.  
Plumb.
- INFLAMMATION:** Acon. Arsen.  
Bellad. Bryon. Canth. Cham. Chin.  
Cic. Ipec. N. vom. Phosph. *Plumb.*  
Puls. Rhus. Sabina. Spongia.  
Stram. *Veratr.*
- LABORLIKE-PAIN:** Aco. Asa. *foet.*  
Aur. Camph. Carbo vegetab. Cham.  
Cina. Coff. Cupr. Ferr. Hyoseyam.  
Ign. Ipec. Kali c. Nux vom. Op.  
Puls. Rhus. Sabina. Sec. corn.
- LARGE:** Antim. crud. Calc. Caust.  
Coloc. Hep. sulph. Kali c. Sep.  
Staph. Thuj.
- LEAD-COLIC:** Hyoseyamus. Op.  
Stram.
- MOVEMENTS,** internal: Coloc.  
Croc. Cupr. Dig. Iod. *Nux vom.*  
Thuj. Valer. *Veratr.*
- NAUSEA:** Bryon. Cic. Coecul. Croc.  
Cupr. Hell. Ipec. Rheum. Ruta.  
Samb. Silic. Stannum. Staph.
- PAIN,** diarrhœic: Ambr. Antim.  
crud. Arg. Asa f. Bar. Bellad. Bry.  
Calc. Canth. Carbo an. Carbo veg.  
Cham. Chin. Coff. Dig. Graph.  
Hell. Ign. Kali c. Mere. N. vom.  
Nitr. ac. Op. Petr. Phosph. Plat.  
Pulsat. Rhod. Rhus. Sabin. Sec.  
corn. Sep. *Spigel.* Staph. *Vera-*  
*trum.* Zinc.



- simple: Aco. *Ant. crua.* Arg. *Ars.* Bar. Bell. Bryon. Calc. *Canth.* Carbo veg. *Causticum.* Cham. China. Cic. Coloc. Con. *Cupr.* Dros. *Euphorb.* Euphr. Graphit. Hell. *Hyosc.* Ign. Ipec. Iod. *Kali c.* Lyc. Merc. Nitr. ac. Nux vom. Op. Petr. Phosph. Plat. Plumb. Puls. Rheum. Rhus. Ruta. Samb. *Sec. corn.* Sep. Sil. Spig. *Stann.* Sulphur. Veratr. Zinc.
- PINCHING: Alum. Ant. cr. *Ars.* Asa f. Aur. Bar. Bell. Bry. Calc. Cann. *Canth.* Carb. v. Caust. Chamom. Chin. Cic. Cina. Cocc. Coloc. (Coff.) Croc. Cupr. Dig. Dros. Dulc. *Euphr.* Graph. Hell. Hep. *Hyos.* Ign. Ipec. *Kali c.* Lyc. Merc. Mur. ac. Natr. mur. Nitr. ac. N. vom. Petr. Phosph. Ph. ac. Plat. Plumb. Puls. Rheum. Rhus. Rut. *Sabad.* Samb. Sep. Silic. Spigel. Spong. *Stann.* Staph. Sulph. Valer. Veratr. Zinc.
- PRESSURE: Acon. Alum. *Ambr.* Antim. crud. Arg. Arn. *Ars.* Asa f. Aur. Bell. Bry. Calc. Camph. Caps. Carb. v. Chin. Cina. Cocc. Coff. Coloc. Con. Croc. Cupr. Dig. Ferr. Hep. Ign. Iod. Kali c. Lye. Merc. Mosch. Mur. ac. Nitr. ac. N. vom. *Opium.* Petr. Phosph. Plumb. *Pulsatilla.* Rheum. Rhus. Ruta. *Sabad.* Sabin. Samb. Sep. Sil. Spig. *Staph.* Valer. Veratr. Zinc.
- outwards: Acon. *Asa f.* Bell. Cann. Dulc. Kali carb. Lye. *Mercur.* Nitr. acid. Nux vom. Rheum. Thuja.
- inwards: Bry. Bell. Rheum. Zinc.
- as from a stone: Cupr. Hyosc. N. vom. Op. Puls. *Sabad.*
- PRESSING: Alum. Argent. Chin. Coff. Coloc. Euphr. Ign. Iod. Plat. *Pulsat.* Ruta. Sulph. Thuja. *Valer. Zinc.*
- PULSATION: Alum. Calc. Lycop. Merc. Zinc.
- QUALMISHNESS: Bar. Calc. Carb. veg. Ipec. Phosph. Plat. Rhododend. Spong. Veratr.
- RING AROUND NAVEL, as if: Puls.
- SENSITIVENESS: Aconit. Arn. Bry. Canth. Cham. Cic. Coff. Dule. Mosch. Pulsat. Secale cornut. Stram. Valer. Veratr.
- SHOCKS: Arn. Cannab. Platina. *Stann.*
- SORE PAIN: Acon. Alum. *Ars.* Bar. Bellad. Calc. Carb. veg. China. Cic. Coloc. Con. Croc. *Euphorb.* Kali c. Natr. mur. *Nux vom.* Phosph. Sep. *Stann.* Sulph. Zinc.
- STITCHES: Alum. *Ars.* Asa f. Bell. Bryon. Calc. Cann. *Canthar.* Caps. Caust. Cham. China. Coccul. Con. Croc. Cupr. Dig. Ferr. Graph. Hell. Ign. (Ipec.) *Kali carb.* Merc. Nitr. ac. Nux vom. Phosph. *Phosph. ac.* Plumb. Puls. Rhodod. Ruta. *Sabad.* Sep. Spig. *Stann.* Staph. Sulphur. Thuja. Veratr. Zinc.
- SWELLING: Acon. *Ant. crud.* *Ars.* Bryon. Cann. Canth. Cham. Chin. Coloc. Con. Kali carb. Op. Plumb. Sec. corn. Sulph.
- TEARING: Alum. Arn. *Ars.* Aur. Bry. Calc. Canth. Carb. an. Carb. veg. Caustic. Cham. Chin. Coccul. Coloc. Con. Dig. Hell. (Ign.) Ipec. Iod. *Kali carb.* Lye. Merc. N. vom. Phosph. Plumb. Pulsat. Rhus. Ruta. Samb. Sil. Spig. *Stram.* Thuja. Veratr. Zinc.
- TENSION: Acon. Alum. *Ambr.* Ant. crud. Arn. *Ars.* Asa f. Bar. Bell. Calc. Caps. Carb. an. Carb. veg. Chin. Coloc. Graph. Hyosc. Ign. Iod. Lye. Nitr. ac. N. vom. *Opium.* Petr. Plat. Plumb. Pulsat. Rheum. Rhododend. Sec. corn. Sep. Sil. Spong. *Stann.* Staph. Stram. Sulph. Thuja.

**TWITCHING:** Aur. Canth. Caust.  
Chin. Coff. Con. Dig. Graph. Ign.  
Kali c. Phosph. *Rhus*.

**THROBBING:** Arn. Cann. *Canth*.  
Chin. Dulc. Ign. Kali c. Op. Plat.  
*Selen*.

**ULCERS:** *Cupr*. *Plumb*.

**ULCERATIVE PAINS:** Cann.  
Chin. *Coccul*. *Cupr*. Dig. *Hell*.  
Merc. Nitr. ac. *Rhus*. *Sabad*. *Sep*.  
*Stann*.

**UNEASINESS:** *Calcar*. Dulc. Euphorb. *Ipec*. *Kali c*. Nitr. ac. Phosph. Plat. *Sabin*. *Sep*.

**URGING:** Asa f. Bell. Calc. Carb. veg. Coloc. Dig. Dulc. *Graph*. *Ign*.  
Iod. Kali carb. Phosph. *Puls*. *Sep*.  
*Thuj*.

**WARMTH:** Canth. Caps. Cina.  
*Coff*. Iod. *Ipec*. N. vom. Phos.  
*Sabin*. Sec. corn.

**WEAK FEELING:** Acon. Carb. an. (Ferr.) Ign. Phosph. *Platina*.  
*Rhodod*. Sen. *Stann*. Zinc.

**WRITHING:** Alum. Ars. Asa f.  
*Bryon*. Calc. Caps. Cina. Con.  
*Dros*. Dulc. Merc. *Plat*. *Plumb*.  
*Rhus*. *Ruta*. *Sabad*. *Sabin*. *Silic*.  
*Staphys*. *Valer*. *Veratr*.

## Region of the Abdomen.

**ABDOMEN, lower:** Alum. *Ambra*.  
Ant. crud. Arg. Arn. Arsen. Asa f.  
Aur. Bar. Bell. *Bry*. Calc. *Camph*.  
Cann. *Canth*. Caps. *Carbo an*.  
Carb. veg. Caust. Cham. *Chin*. Cic.  
Cina. *Coccul*. Coff. Coloc. Con.  
*Croc*. *Cupr*. Dig. Dulc. Ferr. *Hell*.  
*Hepar*. Hyosc. Ign. Iod. Kali c.  
Lyc. Merc. Natr. mur. Nitr. ac.  
N. vom. Phosph. Ph. ac. Plat.  
*Plumb*. *Puls*. Rheum. Rhod. *Rhus*.  
*Ruta*. *Sabad*. *Sabin*. *Sambuc*. *Sep*.  
*Silic*. Spigel. Spong. *Stann*. *Staph*.  
*Sulph*. *Thuj*. *Valer*. *Veratr*. Zinc.  
—sides of: *Aconitum*. Alum. *Ambr*.

*Antim. crud*. Arg. Arn. Ars. Asa f.  
Aur. Bar. Bell. *Bry*. Calc. *Camphor*.  
Cann. *Canth*. Caps. Carb. an. Carb. v. Caust. *China*. Chin.  
Cina. *Coccul*. Coff. *Croc*. Dig. *Dros*.  
Dulc. Euphorb. Ferr. Graphit.  
Hell. Hep. s. c. Hyosc. Ign. *Ipec*.  
Iod. Kali c. Lyc. *Mercur*. Moschus.  
Natr. mur. Nitr. ac. N. vom.  
Opium. *Petr*. Phosph. Plat. *Plumb*.  
*Puls*. Rheum. Rhodod. *Rhus*. *Ruta*.  
*Sabad*. *Samb*. *Sep*. Sil. Spig.  
Spong. *Stann*. *Staph*. Sulph. *Thuj*.  
*Valer*. Zinc.

**EPIGASTRIUM:** Aco. *Ambr*. Ant.  
crud. Arn. Ars. Asa f. Aur. Bar.  
Bell. *Bry*. Calc. *Camph*. Cann.  
*Canth*. Caps. *Carbo veg*. Caust.  
Chamom. China. Cina. *Coccul*.  
Coloc. Con. *Croc*. Cuprum. Dig.  
*Dros*. Dulc. Euphr. *Hell*. Hep.  
sulph. Hyosc. Ignat. *Ipec*. Iod.  
*Kali c*. Lycop. *Mercur*. Mosch.  
Mur. acid. Natr. mur. N. vom. Op.  
*Petr*. Phosph. Ph. ac. Plat. *Plumb*.  
*Puls*. Rhodod. *Rhus*. *Sabad*. *Samb*.  
*Sep*. Sil. Spig. Spong. *Stannum*.  
*Staph*. Sulph. *Thuj*. *Valer*. *Veratr*.  
Zinc.

**LUMBAR REGION:** Acon. *Ambr*.  
Ant. crud. Arg. Arn. *Aurum*.  
Asa f. Calc. Cann. *Canth*. *Carbo an*.  
*Carbo veg*. Cham. China. Cina.  
*Coccul*. Coloc. Dig. Euphorb. Ign.  
Iod. Kali c. Lyc. Merc. Nitr. ac.  
*Nux vom*. *Plumb*. *Pulsatilla*.  
Rheum. *Rhus*. *Ruta*. Sab. Sec.  
corn. *Sep*. Spig. Spongia. *Staph*.  
Sulph. *Thuj*. *Valer*. Zinc.

**UMBILICAL REGION:** Aco. Alum.  
*Ambr*. Ant. crud. Arn. Asa f. Bar.  
Bell. *Bry*. Calc. Cann. *Canth*.  
Caps. *Carbo an*. *Carbo veg*.  
Causticum. Cham. *Chin*. Cina.  
*Coccul*. Coloc. Con. Dig. Dulcam.  
*Graph*. Hep. sulph. Hyosc. Ignat.

*Ipec.* *Iod.* *Kali carb.* *Merc.* *Mosch.*  
*Mur. acid.* *Nux vom.* *Op.* *Phosph.*  
*Ph. ac.* *Platina.* *Plumb.* *Pulsat.*  
*Rheum.* *Rhod.* *Rhus.* *Ruta.*

*Sabina.* *Sep.* *Sil.* *Spigel.* *Spongia.*  
*Stann.* *Staph.* *Sulph.* *Thuj.* *Valer.*  
*Veratr.* *Zinc.*

## XVII. CATARRH.

### Sensations.

CATARRH: *Alum.* *Ambr.* *Antim.*  
*crud.* *Arg.* *Asa f.* *Ars.* *Bar.* *Bell.*  
*Bry.* *Calc.* *Camphor.* *Canth.* *Caps.*  
*Carbo vegetab.* *Caust.* *Chin.* *Cina.*  
*Coccul.* *Coloc.* *Cupr.* *Dros.*  
*Euphorb.* *Euphr.* *Graphit.* *Hell.*  
*Ign.* *Iod.* *Kali c.* *Lach.* *Lyc.* *Merc.*  
*N. vom.* *Natrum mur.* *Nitric acid.*  
*Petr.* *Phosphor.* *Ph. ac.* *Plat.*  
*Plumb.* *Puls.* *Rhod.* *Rhus.* *Selen.*  
*Sep.* *Sil.* *Spig.* *Spong.* *Stannum.*  
*Staph.* *Sulph.* *Thuj.* *Veratrum.*  
*Zinc.*

—on one side: *N. vom.* *Puls.*

—alternately fluent and stopped: *Nux vom.* *Puls.*

—in the day time: *N. vom.*

CATARRH, generally: *Acon.* *Arn.*  
*Camph.* *Coccul.* *N. vom.* *Puls.*  
*Sabad.*

CATARRHAL FEVER: *Acon.*  
*Bellad.* *Bryon.* *Camph.* *Cham.* *Coff.*  
*Graph.* *Hep. s.* *Mercur.* *Nitric ac.*  
*N. vom.* *Rhus.* *Sabad.* *Sep.* *Spig.*

CATARRHAL DISCHARGE DELAYED: *Calc.*

CATARRHAL FEELING: *Ambr.*  
*Ant. crud.* *Arg.* *Bry.* *Cann.* *Carbo an.*  
*Carbo veg.* *Cic.* *Coff.* *Ign.* *Ipec.*  
*Merc.* *Mur. ac.* *Nitr. ac.* *Phosph.*  
*Sabin.* *Thuj.*

CORYZA: *Acon.* *Alum.* *Ambr.* *Ars.*  
*Bar.* *Bellad.* *Bry.* *Calc.* *Camphor.*  
*Cann.* *Capsicum.* *Carb. an.* *Carb. veg.*  
*Caust.* *Cham.* *China.* *Coff.*  
*Con.* *Cupr.* *Dig.* *Dulc.* *Graphites.*

*Hep.* *sulph.* *Ign.* *Ipec.* *Kali c.* *Lyc.*  
*Mosch.* *Mur. ac.* *Natr. mur.* *Nitr. ac.*  
*N. vom.* *Op.* *Petr.* *Phosph.* *Plat.*  
*Pulsat.* *Rhod.* *Sabin.* *Samb.* *Sep.*  
*Sil.* *Spig.* *Spong.* *Stannum.* *Sulph.*  
*Thuj.* *Zinc.*

—on side: *Nux vom.*

—of infants: *Samb.*

—evening and morning: *Nux vom.*

DRY NOSE: *Ambr.* *Bar.* *Bellad.*  
*Bry.* *Calc.* *Canth.* *Cic.* *Con.* *Dule.*  
*Graph.* *Hyosc.* *Ignat.* *Ipec.* *Lyc.*  
*Merc.* *Mur. acid.* *Natr. mur.* *Nitr. ac.*  
*(Nux vom.)* *Petr.* *Phosph.* *Rhod.*  
*Sep.* *Sil.* *Spig.* *Sulphur.* *Veratr.*  
*Zinc.*

DRY NOSE, without being stopped: *Sep.*

—upper nostrils: *Sabad.*

—front nostrils: *Spig.*

MUCUS FROM THE NOSE, discharge of: *Cham.* *Euphorb.* *Phos.*  
*Rhod.*

—arrest of discharge: *Euphorb.* *Ph. ac.* *Rhod.*

NASAL MUCUS FROM THE POSTER. NARES, corrosive.  
*Ars.* *Nux vom.* *Nitr. ac.* *Sil.*

—smarting: *Ars.* *Sulph.*

—without catarrh: *Rhus.* *Sabad.*  
*Selen.* *Spig.*

—involuntary: *Rhus.*

—bloody: *Ambra.* *Bar.* *Canth.* *Caps.*  
*Caust.* *(Coccul.)* *Cupr.* *Graph.*  
*Kali c.* *Lach.* *Lycop.* *Merc.* *Natr. mur.*  
*Nitrum ac.* *N. vom.* *Petr.* *Phosph.*  
*Ph. ac.* *Puls.* *Sabad.* *Sep.* *Sil.* *Spig.* *Sulph.* *Thuj.*

- burning: **Arsen. Pulsat. Sulph.**
- thick: Alum. Ant. crud. Bar. *Calc.*  
Graph. Mur. ac. Natr. mur. Nitr.  
ac. **Puls. Sabad. Selen. Staph.**  
Sulph.
- thin: Camph. Capsic. Rhus. *Staph.*
- transparent: Sabad.
- purulent: *Calc. Cina. Con. Graph.*  
Lach. Merc. **Puls.**
- and yellow: *Calc. Cicuta. Con.*  
Sulph.
- gelatinous: Selen.
- yellow: *Cic. Puls.* Selen.
- yellow-green: Natr. Phosph. *Puls.*  
Sabad.
- —and bloody: Sep.
- yellowish: Alum. Ant. crud. Bar.  
Bell. Graph. Nitr. ac. Puls. *Spig.*
- —and watery: Sep.
- greenish: Puls. *Spig.*
- clear: Sabad.
- in little lumps: *Selen.*
- acid: *N. vom. Spig.*
- —pus: Merc.
- —water: **Ars. Lach. Lycop. Mur.**  
ac. *N. vom. Sil.*
- odor of catarrh: **Puls.**
- suppressed: Spong.
- fetid: Bellad. *Calc. Caustic. Graphit.*  
Hep. s. Lyc. Mercur. Nitr. ac.  
**Puls. Sep.**
- indurated: Bryon. Lach. Sep.  
Staph.
- increased: *Arg. Bar. Calcar.*  
Canth. *Carbo veg. Cic. Cina. Coff.*  
Con. Euphr. Graph. *Iod. Lach.*  
Mur. ac. *Nux vom. Petr. Phosph.*  
Plat. *Rhod. Rhus. Sabad. Scill.*  
Selen. Sil. Zinc.
- watery: Alum. Bellad. Carbo an.  
China. Coff. Con. Graphit. Ign.  
*Iod. Lach. Mercur. Mur. ac. N.*  
*vom. Phosphor. Plumb. Rhus.*  
Staph. Sulph.
- white: *Spig.*
- tenacious: Alumina. Canthar.  
Graph. Sabad. Sep. *Spig.*

- SNEEZING:** Alum. Ambr. Ant.  
crud. Arg. Arn. *Ars. Asa f. Bar.*  
Bellad. Bov. Bry. **Calc. Cann.**  
Canth. Carbo animalis. *Carbo veg.*  
*Caust. Chin. Cina. Coccul. Con.*  
Croc. Dros. Dulc. *Euphorb.*  
Euphr. Graph. Hell. Hep. sulph.  
Iod. Ipec. Kali c. *Lach. Lyc. Merc.*  
Mosch. Mur. ac. Natr. mur. Nitric  
acid. *N. vom. Petr. Phosph. Rhod.*  
**Rhus. Ruta. Sabad. Sepiæ. Sil.**  
*Spigel. Spong. Stannum. Staph.*  
*Sulph. Thuja. Veratr. Zinc.*
- troublesome: Phosph. Sulph.
- racking: Sabad.
- violent: Aconit. Bar. *Capsic. Chin.*  
Merc. **Rhus. Sabad.**
- vehement: *Cina. Puls. Rhus.*  
Sabad. Valer. Veratr.
- spasmodic: **Rhus.**
- after tingling in nose: Ambr. *Car-*  
*bo veg.* Dros. Mur. acid. Nitr. ac.  
**Puls. Spig. Zinc.**
- painful: Acon. Dros.
- without catarrh: Alum. Ars. Calc.  
Carbo veg. Caust. Cic. Con. Dros.  
*Euphorb. Hyosc. Iod. Lyc. Mer-*  
*cur. Nitric acid. Phosph. Stann.*  
*St. Zinc.*
- dry: Chin.
- excessive: Bry. Merc. Sil.
- suppressed: Aconitum. Alum.  
*Carbo veg. Caust. Coccul. Natr. mur.*  
Plumb. Sil. Zinc.
- desire for: *Ambra. Carbo veg. Mur.*  
ac. Phos. Sil. Sulph. Zinc.
- ineffectual: Canth. *Carbo veg.*  
Caust. Euphorb. Hell. Lyc.  
Phosph. Plat. Plumb. Sil.

**SNIFFLING:** Sep.

- STOPPAGE OF NOSE:** Alum.  
Ambra. Ant. crud. Arg. Aur. Bar.  
Bell. Bry. Calcarea. Carbo veg.  
*Caustic. Cham. Chin. Cic. Cina.*  
Con. Digit. Graph. (Ign.) Iod.  
Kali c. *Lach. Lyc. Merc. Mosch.*  
Natr. mur. Nitr. ac. *N. vom. Op.*



Petr. *Phosph.* Plumbum. **Puls.**  
*Rhod.* (Rhus.) **Samb.** *Sep.* *Sil.* Spig.  
*Stann.* (Staph.) Stram. *Sulph.*  
 Thuja. Zinc.  
 —behind: *Staph.*  
 —in front: Arg. **Spig.**  
 —in one nostril: Ignat. *Sabad.*  
*Staph.*  
 —as from a leaf high up: Ignat.  
 Mur. ac.  
 —feeling of: Plumb. *Stram.*  
 —by ulceration every night: **Lycop.**

### Accompanying Ailments.

ABDOMEN, burning on: Carb. v.  
 —rumbling in: Phosph.  
 —stitches in: Carb. veg.  
 BACK-ACHE: Kali carb.  
 CHEEKS, redness of one half:  
 Cham. N. vom.  
 STUPEFACTION: *Hell.*  
 CHEST, simple pain in: Aconit.  
 Bry. Caust.  
 —roughness: Carb. veg. *Sulph.*  
 —stitches: Merc.  
 —pain, as if flying to pieces: Cina.  
*Sil.*  
 —striction of: Phosph.  
 CHILLINESS: Caust. Graph.  
*Sulph.*  
 —and heat altern.: Graph.  
 COLIC: Calc.  
 —aching: Acon. Canth.  
 COUGH: Bell. Cupr. Nitr. ac. N.  
 vom. *Sulph.*  
 —desire to, in throat: Petr. *Sep.*  
*Sulph.*  
 DIARRHŒA: *Sep.*  
 DRAWING IN THE ARMS: *Sep.*  
 DRY LARYNX: N. vom.  
 DRY MOUTH: N. vom.  
 DROWSINESS: Cham. N. vom.  
 Petr.  
 DULL FEELING IN HEAD:  
 Cham. *Hell.*  
 DYSPNŒA: *Sep.*  
 EARS, buzzing in the: *Rhodod.* *Sep.*

—pains in the: Arn. Lach. **Puls.**  
 EYES, pain in the: *Sep.*  
 —red: Veratr.  
 —weeping: Alum. *Carbo veget.* Chin.  
**Euphr.** N. vom. *Staphys.* Veratr.  
 —lids, red: *Sabad.*  
 —closed by gum: Caust.  
 —smarting in the corners of: Carb.  
 veg.  
 FACE, bloated: N. vom. *Staph.*  
 —hot: N. vom. *Rhodod.*  
 FEVER CHILL: Bry. Caps. **Chamom.** N. vom. **Puls.** Spong.  
 —heat: Spig.  
 HEAD, burning in: Calc. *Hell.* *Lyc.*  
 N. vom. Phosph.  
 —simple pain in: Acon. *Byron.*  
*Calc.* Caust. *Chin.* Cic. Cina.  
*Euphr.* Graph. *Hell.* Kali c. Lach.  
*Lyc.* Nitr. ac. N. vom. Phosph.  
**Puls.** *Rhodod.* *Sep.* Spig. Thuja.  
 —stitches: *Sabad.*  
 —cloudiness: *Staph.*  
 —contraction: *Sabad.*  
 —dull: Chin. Dule. *Euphr.* *Hell.*  
*Lyc.* *Phosph.* *Rhodod.*  
 HOARSENESS: Ars. Caust. Kali  
 carb. Nitr. ac. N. vom. **Puls.** Spig.  
 HOT HANDS AND FEET: N. vom.  
 —at night: *Lyc.*  
 LANGUOR: Graph. *Sep.*  
 LIMBS, pains in the: Calc. Caust.  
 Ipec.  
 —distortion of: Phosph.  
 LIPS, corrosive: **Cam.**  
 —chapped: **Chamom.** *Hell.* *Staph.*  
 —itching: *Hell.*  
 LOSS, of appetite: Phosph.  
 —of smell: Arn. Cina. *Coccul.* *Hell.*  
 N. vom. **Puls.** *Rhod.* *Sabad.* Spig.  
*Staph.*  
 —of taste: **Puls.** *Sabad.*  
 NAUSEA: Graph.  
 NOSE, sensitive: Calcar. China.  
 N. vom.  
 —burning: (Arn.) **Puls.**  
 —inflammation: *Lycop.* Merc. *Stann.*

- biting in the: Carb. veg. Euphorb.
- ulceration: **Cham.**
- swelling: *Bry.* Cham. Puls. Rhus. Spig.
- heat: N. vom.
- itching: **Nux vom.** Sabad. Spig.
- — under the nose: Hell.
- titillation: Capsic. Carb. veg. Nux vom. Puls. Sabad. Sep. Staph.
- scraping: N. vom.
- soreness: *Lach.* **Nux vom.** Puls. Spig.
- sore pain: China. Nitr. acid. N. vom. Staph.
- NOSTRILS, ulcerated: *Bry.* Calc. *Corcul.* Ign. Lye. Merc. Petr. Puls.
- PHOTOPHOBIA: Puls.
- SICK FEELING ALL OVER: Phosph.
- SLEEPLESSNESS: Ars.
- SUBMAXILLARY GLAND, pains in the: Graph.
- THIGHS, drawing in the: Sep.
- THIRST: **Cham.** Graph. Lye.
- THROAT, inflamed: Phosph.
- creeping in: Kali c.
- simple pain in: *Nux vom.*
- feeling of roughness: *N. vom.* Nitr. ac. Phosph. Rhodod.
- THROAT, stitches in: Nitr. ac.
- scraping in: N. vom.
- mucus in: N. vom.
- TOOTH-ACHE: Chin. Lach.
- UPPER LIP, inflamed: Lye.
- URINE, flow of: Veratr.
- VERTIGO: Chin. N. vom.
- WHINING MOOD: Puls. Spig.
- YAWNING: *Bry.* Cupr. Hell.

## XVIII. BREATHING, RESPIRATION.

### Sensations.

- ASTHMA: *Aco.* Ant. crud. Arn. Ars. Asa f. Aur. Bell. Bry. Ca'e. Capsic. Carb. anim. Carb. veg. Cham. Chin. Cic. Cina. Coccul. Coloc. Con. Cupr. Dig. Dros. Euphorb. Euphras. Ferr. Graphit. Hyosc. Ignat. Ipec. Iod. Kali c. Lye. Merc. Mur. ac. Natr. mur. Nitr. ac. Nux vom. Op. Petr. Phosph. Plat. Plumb. Puls. Rheum. Rhod. Ruta. Sabin. Sec. cor. Sep. Sil. Spic. (Spong.) Stann. Staph. Sulph. Thuja. Veratr. Zinc.
- spasmodic: Aconitum. Ambr. Caust. Cham. Chin. Coffea. Cupr. Ferr. Ipec. Kali c. Mosch. N. vom. Op. Puls. Samb. Veratr.
- BREATHING, moaning: Ipecac. (See also: groaning.)
- Anxious: Acon. Arn. Ars. Bellad. Bryo. Camph. Cham. Coff. Ferr. Hep. s. Ign. Ipec. N. vom. Op. Phosph. Plat. Plumb. Puls. Rhus. Samb. Secale corn. Spig. Spong. Staph. Stram. Thuja.
- intermittent: Camph. Op.
- wheezing: Cham. China. Nitr. ac.
- noisy: Acon. Chin.
- hurried: Ipec. Samb.
- labored: Aco. Ign. Spong.
- hot: Aco. Ant. crud. Bry. Brom. Cham. Coffea. Ferr. Natrum mur. Platina. Rhus. Sabad. Sulph.
- cold: (Carbo vegetab.) Chin. Rhus.
- cooling in trachea: Arn.
- panting: Arn. Camph. Cupr. Ipec. Nitr. ac. Op. Phosph. Sil. Spong. Stann.
- small: Bell.
- spasmodic: Puls.
- slow: Aconit. Camph. China. Cic. Hyosc. Ign. Nux vom. Op. Spong. Staph.

- loud: *Aco. Cina. Op. Veratr.*
- low: *Ign.*
- deficient: *Bell. Camph. Cantharis. Caustic. Cic. Coccul. Dig. Ferr. Hell. Ign. Ipec. Iod. Merc. Nux vom. Platina. Puls. Rhus. Spig. Spong. Stram. Staph. Veratr.*
- faint: *Chin. Nitr. ac. Opium. Phosph. Veratr.*
- wheezing: *Calc.*
- piping: *Alum. Ambra. Cann. Cham. China. Cina. Cocc. Coloc. Hep. sulph. Iod. Kali c. Lye. Natr. mur. Nux vom. Phosph. Plumbum. Sabad. Samb. Sep. Spong. Sulph.*
- having an odor: *Ars. Aur. Natrum mur. Nitr. acid. Petr.*
- pungent: *Dros.*
- foul: *Arn. Arsen. Aur. Bry. Cham. Chin. Graph. Iod. Nitr. ac. Puls. Ruta. Sabin. Sep. Spig.*
- like milk: *Spong.*
- sour: (*Cham.*) *Nux vom.*
- like sulphur: *Nux vom.*
- fetid: *Aco. Ambr. Arn. Aur. Bar. Bellad. Bryo. Camph. Canth. Caps. Carbo animal. Carbo vegetab. Cham. Chin. Croc. Ferr. Graph. Hyosc. Ign. Ipec. Kali c. Merc. N. vom. Petr. Plumb. Puls. Rheum. Sep. Spig. Stann. Stram. Sulph. Zinc.*

**BREATHING**, short: *Acon. Alum. Arn. Ars. Asa f. Aur. Bar. Bell. Bry. Calc. Camph. Cann. Canth. Carbo veg. Caust. Cham. Chin. Cic. Cina. Coccul. Coffea. Coloc. Con. Cupr. Digit. Euphorb. Euphrasia. Ferr. Hepar. sulph. Hyosc. Ign. Ipec. Kali carb. Lycop. Merc. Natr. mur. Nitr. ac. N. vom. Op. Petr. Phosph. Plat. Plumbum. Puls. Rhod. Rhus. Ruta. Sabad. Sabina. Samb. Sec. corn. Sep. Sil. Spig. Spong. Stann. Stram. Sulph. Veratr. Zinc.*

- heavy: *Aco. Alumina. Arg. Arn. Ars. Asa f. Aur. Bar. Bell. Bry. Calc. Camph. Cann. Canth. Caps. Carb. veg. Caust. Chin. Cic. Cina. Coccul. Con. Croc. Cupr. Dig. Dros. Euphr. Ferr. Graph. Hell. Hep. s. Hyosc. Iodine. Kali c. Lye. Merc. Nux vom. Op. Phosph. Ph. ac. Plat. Plumb. Pulsat. Rhod. Rhus. Sabad. Sec. corn. Selen. Sep. Sil. Spig. Spong. Stann. Staphysag. Stram. Sulph. Thuj. Valer. Veratr.*
- deep: *Ant. crud. Arn. Aurum. Bell. Bry. Camph. Cann. Caps. Cham. Chin. Cic. Dig. Dros. Hell. Hep. sulph. Ign. Ipec. Kali c. Merc. Mosch. Mur. ac. N. vom. Op. Phos. Plat. Plumbum. Rhus. Selen. (Sil.) Spong. Stann.*
- disposed to draw along: *Croc. Cupr. Hell. Lach. Mosch. Rhus. Sabin. Selen. Stram.*

**BREATH**, stoppage of: *Asa foet. Bell. China. Cic. Coff. Dros. Mosch. Opium. Pulsat. Ruta. Zinc.*

—incarceration of: *Aco. Arn. Bar. Bellad. Bryon. Calc. Camph. Cann. Canth. Capsic. Carbo an. Cina. Cocc. Croc. Cupr. Dros. Euphr. Ipec. Kali carb. Mosch. Natr. mur. Nitric ac. Op. Phosph. Plat. Plumb. Puls. Rhus. Ruta. Sabin. Sep. Sil. Spig. Spong. Staphys. Stram. Sulphur. Veratr.*

**BREATHING**, oppressed: *Aconit. Alum. Ambr. Ant. crudum. Arg. Arn. Ars. Asa f. Aur. Bar. Bellad. Bryon. Calc. Camph. Cann. Canth. Caps. Carbo an. Carb. veg. Caust. Cham. Chin. Cina. Coccul. Coff. Coloc. Con. Croc. Cupr. Digitalis. Dros. Dulc. Ferr. Graph. Hell. Hep. sulph. Hyosc. Ignatia. Ipec. Iod. Kali c. Lycop. Merc. Mosch. Mur. ac. Natr. mur. Nitric ac. N. vom. Op. Petr. Phosph. Phos. ac.*

*Plat. Plumb. Puls.* (Rheum.)  
*Rhod. Rhus. Ruta. Sabad. Sabina.*  
*Samb. Sec. corn. Sepiæ Sil. Spig.*  
*Stann. Staph. Stram. Sulph. Thuja.*  
*Valer. Veratr. Zinc.*

EXPIRATION, blowing: *Chin.*

—slow: (*Arnica.*) *Camphora. Cham.*  
*Chin. Hell. Ign.*  
 —quick: *Chin. Ign. Stram.*  
 —sniffing: *Rhus.*  
 —difficult: *Ipec.*  
 —strong: *Caps. Chin.*

INSPIRATION, slow: *Ferr. Ignat.*  
*Op. Staph. Stram.*

—stertorous: *Nux vomica. Op. Puls.*  
*Rheum.*

—quick: (*Arnica.*) (*Camphora.*)  
*Cham. Ign.*

—difficult: *Chin. Cina. Coccul. Ferr.*  
*Ign. Staph. Veratr.*

—like urine: *Graph.*

—rattling: *Acon. Arn. Bell. Bry.*  
*Calc. Cann. Carbo an. Caust.*  
*Cham. Chin. Cina. Croc. Cupr.*  
*Ferr. Hyosc. Ipec. Lye. Op. Petr.*  
*Samb. Sepiæ. Spong. Stannum.*  
*Stram.*

—hiccuping: *Asa f. Op. Sec. corn.*

—stertorous: *Bellad. Cham. Chin.*  
*Coccul. Cupr. Hep. sulph. Ign.*  
*Kali c. Natr. mur. Nitric acid. Nux*  
*vom. Op. Petr. Sep. Stannum.*  
*Stram. Sulph.*

—painful: *Acon. Arn. Arsenic. Bry.*  
*Chin.*

—quick: *Acon. Asa f. Bell. Bryon.*  
*Cupr. Dig. Hell. Hep. s. Ign. Ipec.*  
*N. vom. Op. Samb. Secale cornut.*  
*Spong. Stram. Veratr.*

—sniffing: *Arn. China. Nux vom.*  
*Rhus. Sabin.*

—sighing: *Ant. crud. Capsicum.*  
*Chin. Coccul. Op. Secale corn.*  
*Selen. Stram.*

EXPIRATION, groaning: *Bell. Bry.*  
*Cham. Cina. Coccul. Cupr. Ign.*

*Kali c. Mur. ac. Nux vom. Op. Sec.*  
*corn. Stram.*

—inequal: *Coccul. Ignat. Ipec. Op.*  
*Sec. corn.*

—imperceptible: *Veratr.*

—irregular: *Bell.*

—interrupted: *Acon. Cham. Cic.*  
*Cina. Cupr. Ignat. Op. Puls.*  
*Phosph.*

—suppressed: *Cupr.*

SUFFOCATING FITS: *Acon. Ant.*  
*crud. Ars. Bell. Bryon. Camph.*  
*Cann. Causticum. Cham. Chin.*  
*Coccul. Coff. Con. Cupr. Digit.*  
*Hep. sulph. Hyosc. Ignat. Ipec.*  
*Lach. Mosch. Nux vom. Op. Plat.*  
*Plumb. Puls. Rhus. Sabad. Samb.*  
*Sec. corn. Spong. Staph. Sulph.*  
*Veratr.*

### Causes of the Impeded Respiration.

ABDOMEN, flatulence: *Capsic.*  
*Cham. Ign.*

—unpleasant feel: *Ars.*

—simple pain: *Arn. Bry. Ign. Ruta.*

—swelling: *Bry.*

—pinching: *Rhus. Spig.*

—cutting: *Puls.*

—weight like a stone: *N. vom.*

—stitches: *Croc. Dros. Mosch. Nux*  
*vom. Puls. Ruta.*

—fullness: *Cann. Caps. Cham. Chin.*  
*Phosph.*

—compression: *Staph.*

—crying: *Cupr. Rhus. Samb.*

—simple pain in: *Stannum.*

—jerks in: *Calc.*

ANXIETY: *Aco. Arnica. Croc. N.*  
*vom. Puls. Rhus. Ruta. Valer.*  
*Veratr.*

—fits of: *Ars. Lye. Stann.*

ARMS ABOVE THE HEAD, rais-  
 ing the: *Cupr.*

BACK-ACHE: *Arg. Cann. Lach.*  
*Ruta. Sep. (Staph.)*

—dislocation-pain in: *Petr.*



—simple pain in: *Puls.* Selen.  
 —stitches in: *Nux vom.* Puls.  
 BLADDER, stitches in: *Aur.*  
 BREATHING, nasal: Puls.  
 CHAGRIN: *Ars.* *Cham.*  
 CHEST, oppression in: *Aconit.* *Arn.*  
   *Cann.* *Cic.* *Cin.* *Coccul.* *Coff.* *Dros.*  
   *Ign.* *Merc.* *N. vom.* Puls. *Rhus.*  
   *Sabad.* *Spig.* *Veratr.*  
 —pressure in the: *Argent.* *Arn.* *Asa f.*  
   *Bellad.* *Camph.* *Cann.* *Caust.* *Cham.*  
   *Chin.* *Cic.* *Ign.* *N. vom.* *Rheum.*  
   *Ruta.* *Sabad.* *Samb.* *Spig.* *Staph.*  
   *Stram.* *Valer.*  
 —spasm in the: *Petr.*  
 —empty feeling: *Stann.*  
 —faintness in the: *Stann.*  
 —heaviness in the: *Plat.*  
 —tension in the: *Merc.* *Mur. ac.*  
 —stitches in the: *Anr.* *Carbo veg.*  
   *Merc.* *Stann.*  
 —fullness in the: *Sep.*  
 —contraction in the: *Sep.*  
 —as if oppressed by a load: *Rheum.*  
   *Sabad.* *Spig.*  
 —ulcerative pain: *Staph.*  
 —throbbing in: *Asa f.*  
 —spasms in: *Asa fœt.* *Cupr.* *Plumb.*  
 —pressing in: *Ign.* *Veratr.*  
 —mucus in: *Cina.*  
 —pain generally: *Selen.*  
 —weight in: *Cann.* *Ign.* *Rhus.*  
 —tension in: *Cann.* *Cic.* *Coccul.* Puls.  
   *Rhus.* *Staph.*  
 —stitches in: *Acon.* *Arg.* *Asa f.* *Bry-*  
   *on.* *Canth.* *Caps.* *Chin.* *Dros.* *Plumb.*  
   *Ruta.* *Spig.* *Staph.* *Veratr.*  
 —shocks in: *Cann.*  
 —fullness in: *Acon.* *Ant. er.* *Caos.*  
   Puls. *Ruta.* *Veratr.*  
 —as if bruised: *N. vom.*  
 —drawing in: *N. vom.*  
 —contraction in: *Arn.* *Asa f.* *Can-*  
   *thar.* *Capsic.* *Chin.* *Coccul.* *Cupr.*  
   *Hell.* *Ipec.* *Moschus.* *N. vom.* *Op.*  
   *Spig.* *Staph.* *Veratr.*  
 COUGH: *Ars.* *Bry.* *Coccul.* *Cuprum.*

*Dros.* *N. vom.* *Petr.* *Rhus.* *Sil.*  
*Spig.* *Veratr.*  
 —dry: *Cupr.* *Ipec.* *N. vom.* *Rhus.*  
   *Sep.*  
 CRAMP, in left side: *Merc.*  
 DREAMS, anxious; *Graph.*  
 —as from dust: *Ipec.*  
 EPIGASTRIUM, pain in: *Arsenic.*  
   *Coccul.* *Hell.* *Pulsat.* *Sep.* *Staph.*  
 FLATULENCE: *Cham.* *Nux vom.*  
   Puls.  
 HEAD, dull: *Sep.*  
 —ache: *Arn.*  
 HEART, stitches in the: *Cham.* *Petr.*  
   (Puls.)  
 —region of, pain in the: *N. vom.*  
   (Puls.)  
 HYPOCHONDRIA, swelling in:  
   *Cham.* *Ign.*  
 —pain in: *Chin.* Puls. *Staph.*  
 LARYNX, mucus in: *Chin.* *Cupr.*  
 —contraction: *Sabad.* *Spoug.*  
 LIVER, pain in: *Sep.*  
 LUNGS, weak: *Stann.*  
 MORTIFICATION: *Ign.* *Staph.*  
 NAPE OF NECK, drawing and  
   stinging in: *Sep.*  
 NAUSEA: *Rhus.* *Samb.*  
 NOSE, dry: *Canth.*  
 ODORS, strong: *Phosph.*  
 PALPITATION OF HEART: *Spig.*  
 RECTUM, stitches in: *Sulph.*  
 RIBS, pains under the: *Sep.*  
 RISING, from abdomen: *Valer.*  
 SCAPULÆ, pressure in: *Rhus.*  
 —pressure when leaning against: *Sep.*  
 —stitches: Puls. *Sep.*  
 —dislocation-pain: *Petr.*  
 —drawing: *Rhus.* *Ruta.*  
 STITCHES IN RIGHT SIDE:  
   *Graph.*  
 SPLEEN, pain in: *Ruta.*  
 —stitches in: *Arn.*  
 STOMACH, anxiety in pit of: *Can-*  
   *nab.* *Ferr.* *Sabad.* *Stram.*  
 —pressure in pit of: *Arn.* *Bry.*  
   *Camph.* *Chamoin.* *Chin.* *Cic.* *Coc-*

- cul. Helleb. Hyosc. Ignat. *Mosch.*  
*Nux vom.* **Rhus.** *Samb.*  
 —cramp in pit of: *Sulph.*  
 —simple pain in pit of: *Arnic.* *Cina.*  
*Helleb.* *N. vom.* *Pulsat.* *Ruta.*  
*Sabad.*  
 —feeling as if swollen in pit of: *Rhus.*  
 —stitches in pit of: *Chin.* *Phosph.*  
*Spig.*  
 —warmth in ditto: *Bry.*  
 —digging in ditto: *Chin.*  
 —gripping: **Phosph.**  
 —pain in: *Caps.* *Cham.* **Rhus.**  
 —fullness in: **Chin.** **Coccul.**

LIKE VAPORS OF SULPHUR:  
*Croc.* *Mosch.*

- TRACHEA, obstacle in: *Cannab.*  
*Spong.*  
 —tickling: *Rhus.*  
 —mucus in: *Cupr.* **Ruta.** *Veratrum.*  
 —contraction of: *Canth.* *Ipec.* **Puls.**  
 THROAT, as if larger: *Veratr.*  
 —scraping in: *Sabad.*  
 —like a plug: **Spong.**  
 —constriction: *Canth.* *N. vom.* **Puls.**  
*Veratr.*  
 —rising in: *Cann.* *Stann.*  
 —like a foreign body in: *Cic.*  
 —mucus in: *Aur.*  
 —dryness: *Petr.*  
 —constriction: *Cham.* **Coccul.**  
 THROAT-PIT, constriction in:  
**Rhus.**

## XIX. COUGH.

Character of the Cough.

COUGH, in general: *Aco.* *Ambr.*

- Bell.** *Calc.* *Cann.* *Cantharis.* *Caps.*  
*Carbo an.* *Carbo veget.* *Causticum.*  
*Cham.* *Chin.* *Cina.* **Coccul.** *Coloc.*  
**Con.** *Digital.* *Dros.* *Ferr.* *Euphorb.*  
*Graphites.* *Hep. s.* *Ignat.* *Iod.* *Ipec.*  
*Kali c.* *Lyc.* *Mercur.* *Mur. ac.* *Natr.*  
*mur.* *Nitric ac.* *Op.* **Petr.** **Phosph.**  
*Phos. ac.* *Plumb.* *Puls.* *Rhus.* *Ruta.*  
*Sabin.* *Sep.* **Sil.** *Spig.* *Spong.*  
*Staph.* *Sulph.*  
 —with expectoration: **Ambr.** *Ant.*  
*crud.* **Arg.** (*Arn.*) *Ars.* *Asa f.* *Bell.*  
*Bry.* *Calc.* *Carbo veget.* *Caust.* *Cham.*  
*China.* *Cic.* *Cina.* *Con.* (*Croc.*) *Dros.*  
*Euphorbium.* *Euphr.* *Ferr.* *Graph.*  
*Hepar s.* *Ipec.* *Kali c.* *Lyc.* *Merc.*  
*N. vom.* *Natrum mur.* *Petr.* *Phosph.*  
*Ph. ac.* *Plumbum.* **Puls.** *Rheum.*  
*Rhus.* *Ruta.* *Sabad.* *Sabin.* *Secale*  
*cornut.* *Selen.* *Sep.* **Sil.** *Spigelia.*  
*Spong.* *Staph.* *Stront.* *Sulph.* *Ve-*  
*ratr.*  
 —with easy expectoration: *Argent.*  
*Euphr.* *Plumb.* *Puls.* *Staph.*

- with difficult expectoration: *Ambr.*  
*Ars.* *Aur.* *Bry.* *Camph.* *Cann.*  
*Canth.* **Caust.** *Cham.* *Cina.* *Dros.*  
*Euphr.* *Hyosc.* *Ign.* *Iod.* *Kali c.*  
*Nux vom.* *Phosph.* *Plumb.* *Puls.*  
**Sep.** *Stann.* *Staph.* *Sulph.* **Zinc.**  
 —without expectoration: **Aconit.**  
*Alum.* *Ambr.* **Antim. crud.** *Arn.*  
*Ars.* *Asa fet.* *Bar.* *Bellad.* *Bry.*  
**Calc.** *Cann.* *Canth.* **Caps.** *Carbo an.*  
*Carbo veg.* *Caust.* *Cham.* *China.*  
**Coff.** *Coloc.* *Con.* *Croc.* *Cupr.* *Digit.*  
*Dros.* *Euphorb.* *Ferr.* *Graphit.*  
*Hell.* *Hep. s.* *Hyosc.* *Ignat.* *Iod.*  
*Ipec.* *Kali c.* *Lycop.* *Mur. ac.* *Merc.*  
*N. vom.* *Op.* *Petr.* *Phosph.* *Phos.*  
*ac.* *Plat.* *Plumb.* *Pulsat.* *Rheum.*  
*Rhod.* *Rhus.* *Sabad.* *Sep.* **Sil.** *Spig-*  
*gel.* *Spong.* *Stann.* *Sulphur.* *Veratr.*  
*Zinc.*  
 —anxious: *Acon.* *Cina.* *Coff.* *Rhus.*  
 —fatiguing: *Cocculus.* *Crocus.* *Ipec.*  
*N. vom.* *Rhus.*  
 —barking: *Dros.* **Spong.**  
 —dull: *Arsen.* *Bar.* *Bell.* *Carbo veget.*

- Euphorb. **Hep. s.** *Kali c.* Lye. Petr.  
*Phosph. Sep.*
- close: *Asa f. Bry.* Chamom. Coc-  
cul. **Sabad.**
- rocking: Antim. crud. **Ipec. Puls.**  
Rhus.
- suffocative: Aco. Bry. Cham. **Cupr.**  
**Ipec.** Op. Spigilia. **Spong.**
- violent: Ambra. *Cina.* Con. Hep. s.  
Ign. **Ipec.** Merc. N. vom. **Phosph.**  
Ruta. **Sabad.** Spig. **Spong.** **Stann.**
- hoarse: Aco. **Ambr.** *Asa f. Brom.*  
*Chin. Cina.* Drosera. *Samb.* **Spong.**  
Veratr.
- hollow: Aco. (Bell.) Caust. *Cina.*  
Euphorb. Hepar sulph. Ign. **Ipec.**  
Opium. *Phosph. Sambucus.* *Spig.*  
**Spong.** *Veratr.*
- hacking: Acon. Alum. Ars. Cann.  
Canth. China. Coffea. *Coloc.* *Cupr.*  
Dros. Euphorb. *Hell.* Hyosc.  
*Kali c.* Natrum mur. Op. **Phosph.**  
*Plumb.* Rhus. **Stann.** **Sulph.** *Thu.*
- and dry: Alum. Arg. Arn. Ars.  
*Bell. Canth. Capsic.* Carbo an.  
Caust. *Cina.* Con. Graph. Ign.  
*Phosph. Sabad.* Sabin. Sulph.  
Veratr. Zinc.
- irritating: Coff. Ign.
- spasmodic: Aconit. *Ambr.* **Bell.**  
*Bry. Carbo veg.* Chin. *Cina.* Con.  
**Ferr.** Hyosc. Ignatia. **Ipec.** N. vom.  
**Phosph.** Plumbum. Puls. Sep. Sil.  
**Staph.**
- short: Aco. Alumina. Arg. Arn.  
Ars. Aur. **Bell.** Canth. Carbo vege-  
tabilis. *Caust. Coff.* Euphorb. *Ign.*  
**Ipec.** Mere. Mur. acid. Nux vom.  
Natr. mur. **Phosph.** Platina. **Puls.**  
*Rhus. Sabad.* Spigel. *Spong.*
- scraping: Nux vomica. Puls.  
**Sabad.**
- deep: Ambra. Ars. Drosera. **Hep. s.**  
Petr. Phos. *Samb.* **Spong.** **Stann.**  
Veratr.
- unceasing: **Cupr.** Droser. Hyosc.  
**Ipec.**
- titillating: Alum. Arn. *Asa f. Calc.*

- Canth. Caust. Chamom. **Chin.**  
Con. Hyosc. Iod. *Kali.* **Mere.** Nux  
vom. Natrum mur. Nitric ac.  
**Phosph.** Rhus. **Stann.** **Staph.**
- with vomiting: *Alumin.* Arg. Ar-  
sen. *Asa f. Aur. Bry.* Calc. Carbo  
an. Carbo veget. *Cina.* Coccul. Coff.  
Dig. Dule. Iod. Nitric ac. **Phosph.**  
Plat. **Puls.** Rhus. **Spong.** **Stann.**  
**Staphys.** Zinc.
- whooping: Acon. Ambra. Arn. Ars.  
**Bell.** Byron. Cham. China. *Cina.*  
Con. **Cupr.** Dros. Euphr. **Hep. s.**  
**Hyosc.** Ign. Ipecac. *Kali c.* Mosch.  
Mur. ac. N. vom. Opium. **Phosph.**  
**Puls.** Rhus. Ruta. **Sep.** **Spong.**  
**Sulph.** Veratr.

### Expectoration.

- ACRID: Puls.
- BITTER: Ars. Cham. Drosera. Ni-  
tric ac. Puls.
- BLOODY: Acon. Alum. Arn. Ars.  
**Bell.** Bry. Calc. Canth. China. *Cina.*  
Con. Croc. *Cupr.* Daph. Dig. Dro-  
sera. Dule. Ferr. *Hepar sulph.* Hy-  
osc. Iod. **Ipec.** (Kali c.) Lye. **Mere.**  
*Mur. ac. Nitric ac. Op. Phos.*  
*Plumb.* Puls. Rhus. **Sabad.** Sabin.  
Sec. corn. Selen Sep. Sil. **Staphys.**  
**Stram.** Sulphur. Zinc.
- BLOOD, brown: Bry. Rhus.
- thick: Cupr.
- thin: Ferr. Sabin.
- coagulated: Arn. Bryonia. *Canth.*  
Nux vom. Nitric acid. Puls. Sep.
- bright-red: Arn. Cantharis. Chin.  
Dros. Hyoseyam. Rhus. **Sabad.** Sa-  
bina. Sep. Sil.
- frothy: Arn. Dros. Ferr.
- black: Arn. Canthar. China. **Croc.**  
Nux vom. Nitric acid. Puls.
- BILIOUS: Puls.
- TASTING OF OLD CATARRH:  
Ignat. Puls. **Sulph.** Zinc
- COOL: Cann. **Phosph.** (Sulph.)
- COPIOUS: Alum. Bry. Caust. Cic.

- Cina.** Dros. Euphr. Ferr. Graph.  
**Kali c.** Lyc. Puls. Sep. Sil. Stann.  
 num. Sulph.
- HAVING A FOUL TASTE:** Cal-  
 carea. Carbo veg. Cham. Cupr. Ferr.  
 Phosph. Pulsat. Sepiæ. Stann.  
 Zinc.
- FROTHY:** Op. Phosphor. Plumb.  
 Sil.
- GRANULAR:** Chin. Phosphor. Sep.
- GLOBULAR:** Thuja.
- GRAY:** Ambra. Lycop. Sepiæ. Thuja.
- GREEN:** Ars. Cann. Carb. veg. Ferr.  
 Hyosc. Lycop. Puls. Sep. Stann.  
 Thuja.
- INDURATED:** Iod.
- INODOROUS:** Arg.
- LIVER-COLORED:** Puls.
- HAVING A METALLIC TASTE:**  
 Ipec.
- MUCUS, bloody:** Alum. Arn. Ars.  
 Bry. Chin. Con. Dros. Ferr. Iod.  
 Ipecac. Opium. Phosph. Sabin.  
 Sec. corn. Selen. Sil. Spong. Zinc.
- transparent: Ars. China. Sil.
- yellow: Bry. Dros. Puls.
- gray: Ambr.
- blackish: Lyc.
- dry: Bry. Plumb.
- white: Ambr. Argent. Cina. Phosph.  
 Rhus. Sep. Spong.
- tenacious: *Antim. crud.* Ars. Bell.  
 Bryon. Cann. Canth. Carbo veget.  
 Caust. Cham. Coccul. Euphr. Iod.  
 N. vom. Phosph. Puls. Ruta. Samb.  
 Sep. Staph. Veratr. Zinc.
- HAWKING UP OF MUCUS:** (See  
 Larynx.)
- NAUSEOUS:** Dros. (Puls.)
- PURULENT:** Bell. Calc. Chin. Con.  
 Dros. Ferr. Lycop. Kali c. Natr.  
 mur. Phos. Ph. ac. (Puls.) Ruta.  
 Sep. Sil. Staph. Zinc.
- SALT:** Alum. Ambr. Ars. Bar. Cann.  
 Carbo veg. (Drosera.) Graph. Lyc.  
 Phos. Puls. Sep. Stann. Sulph.
- SOUR:** Calc. Phosph. Ph. ac.
- SLIMY:** Alumina. Ambr. Arg. Ars.  
 Aur. Bar. Bell. Bryo. Calc. Caps.  
 Caust. Chamom. Chin. Cina. (Croc.)  
 Digit. Euphr. Ferr. Hep. s. Hyosc.  
 Iod. Ipec. Merc. Mur. acid. Natr.  
 mur. Op. Phosphor. Plumb. Puls.  
 Rhenm. Rhod. Rhus. Sabin. Sec.  
 corn. Selen. Sep. Sil. Spigelia.  
 Spongia. Stann. Staph. Sulph. Zinc.
- HAVING A BAD SMELL:** Arsen.  
 Calc. Stann.
- — taste: Ars. Stann.
- LIKE STARCH:** Arg. Bar.
- SWEETISH:** Calc. Ferr. Nux vom.  
 Phosph. Stann.
- TASTELESS:** Arg.
- TENACIOUS:** Alum. Ars. Carbo  
 veg. Caust. Dulc. Iod. Kali c. Phosph.  
 Sep. Stann. Zinc.
- THICK:** Arg. Ipec. Lyc. Phos. Stann.  
 Sulph. Zinc.
- TITILLATING:** Caust.
- LIKE TOBACCO:** Puls.
- TUBERCLES, brownish:** Phos.
- VISCID:** (Rhus.)
- WATERY:** Arg.
- WHITISH-YELLOW:** Lyc. Phosph.  
 ac.
- YELLOW:** Ars. Bryo. Calc. Dros.  
 Ign. Lyc. Phosphor. Puls. Sep.  
 Spong. Stann. Staph. Thuja.

### Exciting Causes.

- AS FROM THE ABDOMEN:** Ver-  
 atr.
- BY OPEN AIR:** Ars. Lyc. Phosph.
- IN — —:** Bry. Coccul. Ipecac.  
 N. vom. (Rhus.) Syg.
- BY GETTING ANGRY:** (Cham.)
- FROM ASCENDING:** Arg. N. vom.
- BY BARING ONE SELF:** N. vom.
- BY DRAWING ALONG BREATH:**  
 Dulc. Hep. s.
- BREATHING:** Bellad. Coloc. Dulc.  
 Graphit. Hepar sulph. Natr. mur.  
 Sulph.



BY BENDING IN THE CHEST:

Phos. acid.

AFTER CHAGRIN: *Aco. Bry.*

IN COLD AIR: *Aco. Bry. Carbo*  
veg. *Hepar sulph. Phosphor. Spong.*

BY TAKING COLD: *Bryo. Cupr.*

*Dros. Ipec. Op. N. vom. Rhus.*

FROM TAKING COLD: *Carbo veg.*

*Dule. Hep. s. Petr. Phosphor.*

BY CONTRACTION OF ABDO-  
MEN: *Dros.*

BY GETTING COOL: *Arn. Rhus.*

AFTER CRYING: *Arn.*

AFTER DRINKING: *Acon. Ar-*  
senic. *Bry. Coccul. Ferr. Hep. sulph.*

*Lyc. N. vom. Op. (Phosph.)*

FROM DRINKING COFFEE:  
*Capsic. Cham. Coccul. Ign. N.*  
*vom.*

FROM DRYNESS: *Puls.*

BY FEELING OF DRYNESS:  
*Merc.*

AFTER EATING: *Bell. Bryon.*  
*Chin. (Dig.) Ferr. N. vom. Opium.*  
*(Puls.) Ruta. Staph. Zinc.*

WHEN EATING: *Carbo vegetabil.*  
*Coccul. (Puls.) Sep.*

BY EMOTIONS: *Acon. Arn. Bry.*  
*Cham. Nuc vom. Op. Rhus. Staph.*

AFTER ERUCTATION: *Staph.*

BY EXPIRATION: *Cann. N. vom.*

AS FROM FEATHER-DUST:  
*Bellad. Calc. Cina. Ign.*

BY HEAT OF BODY: (*Aco.*)

BY GETTING HEATED: *Aco. Bry.*  
*Ipec. N. vom. Thuja.*

AS FROM A HAIR ON THE  
TONGUE: *Sil.*

HYPOCHONDRIA, irritation in:  
*Thuja.*

—inspiration: *Cina. Croc. Ipec. Puls.*

—deep: *Bry. Cina. Ipec.*

IRRITATION, generally: *Aconit.*

*Alum. Arg. Arn. Ars. Asa f. Bar.*

*Bellad. Bryon. Calc. Cann. Carbo*

*an. Carbo veget. Caust. Cham.*

*China. Cina. Coccul. Coloc. Con.*

*Croc. Dig. Euphorb. Ferr. Graphit.*

*Hepar s. Hyosc. Ignat. Iod. Ipec.*

*Lyc. N. vom. Nitric ac. Petr.*

*Phosph. Pulsat. Rhodod. Sabin.*

*Sep. Sil. Spig. Stann. Staph. Sul-*

*phur. Thuja. Zinc. Veratr.*

BY AN IRRITATION IN THE

LARYNX: *Aco. Alum. Arn. Ar-*

*sen. Bar. Bry. Canth. Caps. Carbo*

*an. Carbo veget. Cham. Cina.*

*Coccul. Coff. Dros. Hep. s. Ign.*

*Iod. Ipec. Merc. Mur. ac. N. vom.*

*Pulsat. Sabad. Sabin. Sep. Sil.*

*Spongia. Staph. Sulph.*

FROM IRRITATION IN THE

REGION OF THE VOID BODY:

(*Iodine.*) *Spong.*

FROM IRRITATION IN THE

STOMACH: *Bell. Bry. Merc.*

BY LAUGHING: *Arg. Chin. Stann.*

BY LOSS OF BREATH: *Aur.*

*Coccul. Dros. Euphr. Hep. sulph.*

*Ign. Ipec. Nux vom. Spig.*

AFTER LYING DOWN: *N. vom.*

*Pu's. Rhus. Ruta. Sabad. Staph.*

WHEN LYING DOWN: *Ambr. Ars.*

*Bellad. Cham. Coccul. Con. Dros.*

*Ferr. Hyosc. Ignat. Ipec. Merc.*

*Phosph. Puls. Rhus. Sabad.*

—in bed: *Cham. Ferr. Nuc vom.*

*Puls. Rhus.*

—on the back: *N. vom.*

—on left side: *Acon. Bryon. Ipec.*

*Phosph. Puls.*

—on right side: *Aco. Carbo an.*

*Ipec.*

FROM MENTAL LABOR: *Ignat.*

*N. vom.*

BY MOTION: *Arn. Ars. Bryon. Ferr.*

*N. vom.*

BY MUCUS: *Cham. Cina. Puls.*

BY MUCUS ON CHEST: *Caustic.*

*Stann.*

BY MUCUS IN TRACHEA: *N.*

*vom.*

FROM NAUSEA: (*Bry.*) *N. vom.*

WHILE NURSING: Chin. Ferr.  
DURING PREGNANCY: *Ipecac.*

*Puls.*

BY PRESSURE: *Iod.*

BY READING: *N. vom.*

BY READING ALOUD: *Nitricacid.*  
*Phosph.*

IN REST: *Caps. Dros. Euphorb.*  
*Ferr. Hyosc. N. vom. Phosph.*  
*Puls. Rhus. Samb.*

BEFORE RISING: *N. vom.*

IN THE ROOM: *Arg. Bry. Croc.*  
*Puls. Spig.*

IN SCREAMING: *Arn.*

BY SHOCKS: *N. vom.*

WHEN SITTING: *Hell. Phosph.*

IN SLEEP: *Arn. Bell. Calcarea.*  
*Cham. Lach. Nitr. ac. Sep.*

WHEN SMOKING: *Acon. Bryon.*  
*Coloc. Ferr. Hell. Ign. Nux vom.*  
*Petr. Spong. Staph.*

WHEN STEPPING INTO WATER: *Spig.*

BY STITCHES: *Aconit. Bryon. N. vom.*

WHEN STOOPING: *Arg. Caust.*  
*Hep. s. Spig.*

BY SUFFOCATIVE FITS: *Chamom. Ipec. Puls.*

AS FROM VAPOR OF SULPH. *Carbo veg. Chin. Ign. Lye. Puls.*

FROM SWALLOWING: *Op.*

FROM TALKING: *Bar. Cham. China. Hep. s. Ign. Ipec. Merc. Phosphor. Stann. Rhus.*

WHEN TEETHING: *Chamom. Cina. Hyosc. Ipec. Rhus.*

THROAT, as if swollen: *Ars.*

—scraping in: *Ambr. Croc.*

—roughness in: *Bry. Nux vom. Plumb. Rhus. Sabad.*

—irritation: *Coff.*

—scraping in: *Puls. Sab.*

—mucus in: *Caustic. Chamom. Coccul. Euphr.*

—stitches in: *Cham. Stann.*

—dryness in: *Bry. Dros. Puls. Rhus. Stann.*

—constriction in: *Coccul. Ign.*

—rising in: *Cham.*

THROAT-PIT, tickling in: *Bella. Cann. Cham. Coccul. Ign. Phos. ac. Puls.*

—pain generally: *N. vom.*

STOMACH, tickling in pit of: *Bar. Bell. Bry. Hep. s. Natr. mur. Phosph. ac.*

BY TICKLING IN THROAT: *Dig. N. vom.*

BY TITILLATION IN THROAT: *Ambra. Bryon. Caic. Caustic. Chin. Euphorb. Hepar sulph. Iod. Zinc.*

HIP, twitching in: *Ars.*

ON WAKING: *Ign. Nux vom. Puls. Rhus.*

WHEN WALKING: *Alumina. Ars. Carbo veget. Ferr. Natrum mur.*

AFTER WALKING IN THE OPEN AIR: *Ferr. Ipec.*

WHEN GETTING WARM IN BED: *Cham. N. vom. Puls.*

BY WEAKNESS: *Stann.*

WORSE BY COUGH: *Ign.*

BY YAWNING: *Arn. N. vom.*

### Accompanying Ailments.

ABDOMEN, pain in: *Dros. Lye. N. vom. Phosph. Ph. ac. Sil. Veratr.*

—cutting in: *Veratr.*

—stitches in: *Ars. Sep. Veratr.*

—shocks in: *Natr. mur.*

—bruised in: *Arsen. N. vom. Puls.*

—contraction: *Dros.*

—pain in muscles of: *Hyosc.*

—stitches in sides of: *Arn.*

ABDOMINAL RING, stitches in: *Veratr.*

ANXIETY: *Acon. Cina. Coffea. Rhus.*

ASTHMA: *Arn. Carb. v. Caust. Coccul. Dig. Euphorb. Ferr. Ipec.*

- Natr. mur. Phosphor. Rhodod.  
*Rhus*. Sep. Veratr.
- BACK, stitches in: **Aco. Chin. Merc.**  
 Puls. Sep.
- BLADDER, pain in: Caps.
- BREATHING, breath, hot: Ant. cr.  
 —snorting: **Chin.**  
 —fetid: Caps.  
 —want of: Ferr. **Ipec.**  
 —incarceration of: *Acon. Arn. Bar.*  
**Bryon. Calc. Cina. Cupr. Ipec.**  
*Merc. Nat. mur. Sil. Spig.*
- CATARRH: **Bell.**
- CERVICAL GLANDS, pain in:  
 Natr. muriat.
- CHOKING: Carbo veget. *Droser.*  
*Hep. sulph. Ipec. N. vom. Puls.*  
 Sep. Sulph.
- CHEEKS, drawing in: Carbo. veg.
- CHILLINESS: Calcar. Carbo veg.  
*Con. Phosph. Sulph.*
- COLIC: *Ambr. Arsen. Canth. Coloc.*  
*Con. Droser. (Ferr.) Ipec. Lycop.*  
*N. vom. Phosph. Sep. Stamm. Ve-*  
*ratr.*
- CONCUSSING THE BODY: Ant.  
 er. **Ipec. Puls. Rhus.**
- CONSCIOUSNESS, loss of: *Cina*
- CONSUMPTION: **China. Ferr. N.**  
*vom. Puls.*
- CRYING: **Arnic. Bellad. Cin.**  
**Hep. s.**
- CHEST, oppression in: *Rhus. Veratr.*  
 —burning in: Ant. crud. Carbo. veg.  
*Caust. Cina. Ferr. Phos. Ph. ac.*  
*Spong.*  
 —pressure in: Carbo. veg. Chin. Iod.  
 Ph. ac. Sil.  
 —as if shaken: **Rhus.**  
 —ulcerative pain: **Staph.**  
 —as if hollow: Sep. Zinc.  
 —itching: **Ambr.**  
 —coldness in: Zinc.  
 —cramp in: **Cina.**  
 —scraping in: *Ruta. Staph.*  
 —roughness: (Arn.) Carbo. veg. Kali  
 carb. Lye. *Sep.*
- rattling: **Bell. Caust. Cham.**
- COUGH,  
 —pains generally: **Ambr. Ars. Bel-**  
*lad. Carb. veg. Caustic. Cham.*  
*Cina. Coff. Dig. Dros. Kali carb.*  
*Lyc. Merc. Mur. ac. N. vom. Nat.*  
*mur. Nitr. ac. Phosph. Ph. ac.*  
*Puls. Sep. Spong. Sulph. Veratr.*  
 —relieved by pressure: *Phosph.*  
 —cutting: Natr. mur. Sulph.  
 —excoriated, as if: Carbo. veg. Lye.  
*Phosph. Sep. Spong.*  
 —heaviness: Zinc.  
 —tension in: *Phosph. Rhus.*  
 —stitches in: **Aco. Arn. Ars. Bell.**  
**Bry. Cann. Chin. Coff. Con. Dros.**  
**Merc. Nux vom. Natr. mur. Pulsat.**  
*Rhus. Sabad. Sep. Zinc.*  
 —fullness: **Sabin.**  
 —qualmishness: **Rhus.**  
 —as if sore: Alum. (Arn.) Bar. Carb.  
 veg. *Caust. Cina. Hepar sulph.*  
*Ipec. Lye. Mur. ac. Nux vom. Nitr.*  
*acid. Phosph. Sep. Silic. Spig.*  
*Spong. Stamm. Sulph.*  
 —pain as if bruised: **Arn.**  
 —as if flying to pieces: **Arsen. Bry.**  
**Caps. Merc. Zinc.**  
 —drawing: Caps.  
 —contraction: **Dros.**
- EAR-ACHE: Caps. (N. vom.)
- EPYGASTRIUM, pain in: **Ambra.**  
**Dros. N. vom.**  
 —stitches in: Sep.
- ERECTIONS: **Cann. Canth.**
- ERETHISM, vascular: **Arn. Chin.**
- ERUCTATIONS: *Ambr. Veratr.*
- EYES, obscured: **Coff.**  
 —sparks before: **Kali.**  
 —tears in: *Cina. Puls. Sabad.*
- FACE, blue: **Ipec. Op. Veratr.**  
 —pale: **Cina.**  
 —hot: **Bell. Ipec. Sulph.**  
 —sweat in: **Ipec.**  
 —distorted: **Spong.**
- FAUCES, burning in: **Caust. Ph.**  
 acid.

—sore feeling in: *Caust.*  
**FALLING DOWN:** *Ipec.*  
**FOREHEAD,** cold sweat on: *Veratr.*  
**HANDS,** swelling of: *Acon.*  
—coldness of: *Sulph.*  
**HEAD,** pressure in: *Alum. Bry. Con.*  
*Nitr. ac. Phosph. Ruta.*  
—as if shaken: *Rhus.*  
—heat in: *Ars. Ipec. Sulph.*  
—tearing in: *Alum. Calc. Sep.*  
—pain generally: *Aco. Bell. Bry.*  
*Chin. Con. Lyc. Sabad.*  
—stitches in: *Alum. Arn. Bry. Calc.*  
*Carb. veg. Con. Ruta. Sabad.*  
—shocks in: *Arsen. Ipecac. Lyc. Natr.*  
*mur. Rhus.*  
—as if bruised: *Sulph.*  
—as if flying to pieces: *Bryon. Caps.*  
*Merc. Nux vom. Natr. mur. Phosph.*  
*Ph. acid. Sep. Sulph.*  
—contractive pain in: *Petr.*  
**HEAT:** *Arn. Bell. Nux vom. Sabad.*  
**HOARSENESS:** *Aco. Ambr. Asa*  
*fet. Chin. Cina. Droser. Samb.*  
*Spong. Stann. Verat.*  
**ILL-HUMOR:** (Bell.) (Spong.)  
**LARYNX,** ulcerative pain in: *Car-*  
*bo veg.*  
—crawling: *Sabin.*  
—irritation in: *Coccul.*  
—pain generally: *Spong.*  
—stitches: *Kali c. Phosph.*  
—as if sore: *Arg. Bry. Carbo veg.*  
*Hep. sulph. Ign. Kali c. Natr. mur.*  
*Sep.*  
**LARYNX,** as if torn: *Staph.*  
**LIMBS,** pain in: *Caps.*  
**MOUTH,** dry: *Coccul.*  
**NAPE OF NECK,** pain in: *Bell.*  
**NAUSEA:** *Bryo. Caps. Drosera.*  
*Ipec. Merc. N. vom. Puls. Ruta.*  
**NOSEBLEED:** *Aco. Dros. Merc.*  
*Puls.*  
**PAIN IN ARM:** *Dig. Puls.*  
**PALPITATION OF HEART:** *Ar-*  
*nic. Calc.*

**PAIN AS FROM HERNIA:** *Petr.*  
—as from fatigue: *Puls.*  
—generally: *Ambra. Droser. N. vom.*  
—tension: *Hell.*  
—stitches: *Aco. Ars. Bryon. Phosph.*  
*Sabad. Sulph.*  
—as if bruised: *Bry.*  
—contraction in: *Dros.*  
—hip: *Ars. Bellad. Caustic. Rhus.*  
**PRESSURE IN HYPOCHON-**  
**DRIA:** *Coccul. Spong. Valer.*  
**PENIS,** pain in the: (Ign.)  
**PTYALISM:** *Veratr.*  
**RECTUM,** stitches in: *Nitric ac.*  
**RESTLESSNESS:** *Aconit. Coff.*  
*Samb.*  
**RIBS AS IF BRUISED:** *Arn.*  
**SALIVA,** bloody: *Dros.*  
**SCREAMING:** *Op. Samb.*  
**SHORTNESS OF BREATH:** *Bry.*  
**SHOULDER,** stitches in: *Puls.*  
—blade, stitches in: *Mercur. Sep.*  
**SIDE,** stitches in: *Aco. Bry. Puls.*  
*Zinc.*  
**SLEEPLESSNESS:** *Hyosc. Lycop.*  
*N. vom. Puls. Rhus. Sabad.*  
**SNEEZING:** *Bell. Bryo. Hepar*  
*sulph.*  
**SMALL OF BACK,** pain in: *Merc.*  
—stitches in: *Aco. Arn. Nitric acid.*  
**SPERMATIC CORD,** stitches in:  
*Veratr.*  
**START,** tendency to: *Aco.*  
**STERNUM,** pain of: *Bell. Chin. Sep.*  
*Sil.*  
**STOMACH,** pressure in: *Lyc.*  
—pain in: *Bry. Hell. Ipecac. Lyc.*  
*Phosph. Puls. Rhus. Ruta. Sabad.*  
*Sep.*  
—pressure in pit of: *Phosph.*  
—simple pain: *Sepia. Stannum. Thuja.*  
—pain generally: *Ambr. Bryo. Ipec.*  
—stitches: *Ars. Bry. Phosph. Sulph.*  
—qualmishness: *Ign.*  
—sore pain: *Bry.*  
—as if bruised: *Stann.*  
—contraction: *Ars.*



**SUFFOCATIVE FITS:** *Aco.* *Bryon.*  
*Cham.* *Cupr.* *Hep. s.* *Ipec.* *Op.*  
*Spig.* **Spong.**  
**SWEAT:** *Ars.* *Dig.* *Hep.* *sulph.* *Ipec.*  
*Rhus.* *Sabad.* **Spong.**  
**TASTE IN MOUTH,** as of blood:  
*Bell.* *Rhus.*  
—bad: *Caps.*  
**TEETH,** gritting of: *Bell.*  
**TOOTH-ACHE:** *Lyc.*  
**TREMBLING OF WHOLE BODY:**  
*Phosph.*  
**TESTICLES,** pain in: *Zinc.*  
**THROAT,** bitter taste in: *Rhus.*  
—burning in: *Mur. ac.* *Phosph.*  
—pressure in: *Caps.*  
—inflammation: *Aco.* *Cham.* *Ipec.*  
*Nux vom.* *Puls.*  
—ulcerative pain: *Caps.*  
—as if swollen: *Caps.* *Puls.*  
—itching: *Ambr.*  
—titillation: *Bry.* *Kali c.*  
—scraping: *Ambr.* *Bell.* *Bry.* *Croc.*  
*Hep. s.*  
—roughness: *Carbo an.* *Caust.* *Hep. s.*  
*Kali c.* **Phosphor.** *Rhod.* *Sep.*  
*Spong.*  
—pain generally: *Caps.* *Hepar s.*  
*Natr. mur.* **Phosph.** *Sil.* *Sulph.*  
—stitches in: *Bryo.* *Nitric acid.*  
*Phosph.*  
—dryness: *Puls.* *Rhus.*  
—sore pain: *Ambra.* *Phosphor.* *Sep.*  
**THROAT-PIT,** pain in: *N. vom.*  
**THROBBING IN ARTERIES:**  
*Calc.*

**THYROID GLAND,** itching in:  
*Ambra.*  
—**CARTILAGE,** titillation in: *Puls.*  
**TOSSING ABOUT:** *Acon.* *Arn.*  
**TRACHEA,** itching in: *Ambr.* *N.*  
*vom.*  
—tickling in: *Cham.* *Sabin.*  
—pain generally: *Camph.* *Chin.* *Ign.*  
*N. vom.* **Spong.**  
—shocks: *Bry.* *Cina.*  
—as if sore: *Ant. crud.* *Bryon.* *Cam.*  
*Caust.* *Chin.* *Nux vom.* *Natr. mur.*  
*Plumb.* *Stann.*  
—as if torn: *Staph.*  
**ULCERS,** pain in: *Con.*  
**UMBILICUS,** pain in: *Ambr.*  
**URINATE,** urging to: *Ipec.*  
**URINATION,** involuntary: *Antim.*  
*crud.* *Bry.* *Puls.* *Spong.* *Staph.*  
*Veratr.*  
**URINE,** retention of: *Ipec.*  
**VERTIGO:** *Aco.* *Coff.*  
**VOMITING,** in general: *Arnica.*  
*(Bell.) Bry.* *Calc.* *Capsic.* *Carbo veg.*  
*Con.* *Cuprum.* *Dros.* *Hep. s.* *Iod.*  
*Ipec.* *Kali c.* *Nux vom.* *Phosph. ac.*  
*(Puls.) Sabad.* *Sep.*  
—bitter: *Chin.* *Sep.*  
—of food: *Bryo.* *(Dig.) Dros.* *Ferr.*  
*Natr. mur.* *(Rhus.)*  
—of mucus: *Dros.* *Hyosc.*  
—sweet: *Calc.*  
—of water: *Dros.*  
**WATERBRASH:** *Amb.* *Ars.* *Bry.*  
*Spig.* *Staph.*  
**WEAKNESS:** *Chin.* *Ferr.* *Veratr.*  
**YAWNING:** *Op.*

## XX. LARYNX AND TRACHEA.

### Sensations.

#### 1. *Larynx.*

**AIR,** rising of: *Lyc.*

**APHONIA:** *Bell.* *Carb. veg.* *Caust.*

*Hep. sulph.* *Merc.* *Natr. mur.* *Phos.*  
*Plat.*

**BURNING:** *Canth.* *Chamom.* *Spong.*

**CHOKING:** *Cupr.* *Dros.*

**CONSTRICTION:** *Camphor.* *Cham.*

Coccul. Coff. **Ipec. Mosch.** N. vom.  
 Plumb. Puls. Spong. **Veratr.**  
**CONTRACTION: Spong.**  
**CONTUSIVE PAIN: Ruta.**  
**COUGH,** desire to: *Acon. Arnica.*  
 Bry. Canth. Caps. **Cham. Cina.**  
 Coccul. Coff. *Droser. Ign. Ipec. N.*  
 vom. Puls. Sabad. *Sabin. Spong.*  
*Staph.*  
**CRAMPY FEELING: Cham. Nux**  
 vom.  
**CRAWLING: Sabin.**  
**CROUP,** gangrenous: **Chin.**  
 —membranous: **Aco. Cham. Dros.**  
*Lach. Samb. Spong.*  
**DRYNESS:** Alum. Carb. an. *Con.*  
*Hyosc. Nux vom. Natr. mur. Petr.*  
**Phosph. Spong. Sulphur. Zinc.**  
**FOOD GETS INTO THE LAR-**  
**YNX:** *Aco. Cann. Rhus. Veratr.*  
**HAWKING UP MUCUS:** Alumina.  
 Ambr. Ant. crud. **Arg. Aur. Bryon.**  
 Calc. Camph. Cann. Canth. Carb.  
 an. Caust. *Cham. Chin. Cina. Coc-*  
*cul. Croc. Dig. Dule. Hyosc. Iod.*  
*Kali c. Lach. Lye. N. vom. Natr.*  
 mur. **Phosph. Plumb. Rhod. Rhus.**  
*Sabad. Sabin. Samb. Selen. Spig.*  
**Stamm. Staph. Sniph. Valer.**  
**HEAT:** Ant. crud. Canth. *Iod.*  
**HOARSENESS: Acon. Alumina.**  
*Ambr. Arn. Ars. Asa f. Bell. Bry-*  
*on. Calc. Camph. Canth. Caps.*  
*Carb. an. Carb. veg. Caust. Cham.*  
*Chin. Cic. Coff. Con. Croc. Cupr.*  
*Dig. Dros. Ferr. Graph. Hep. Ign.*  
*Iod. Kali c. L. ch. Lycop. Merc.*  
*Mur. ac. Nux vom. Natr. mur. Nitr.*  
*ac. Op. Petr. Phosph. Ph. ac. Plat.*  
*Plumb. Puls. Rhus. Sabad. Samb.*  
*Sec. corn. Selen. Sep. Sil. Spig.*  
**Spong. Stamm. Staph. Stramon.**  
*Sulph. Thuaj. Veratr. Zinc.*  
**INFLAMMATION: Acon. Dros.**  
*Ipec. N. vom. Puls. Spong.*  
**ITCHING: Ambra. Con. Nux vom.**

**MUCUS,** accumulation of: Alum.  
 Arg. Ars. Calc. Carb. an. **Caust.**  
*Cham. Chin. Cina. Coccul. Coff.*  
*Dig. Hyosc. Iod. Kali c. Lye. Nux*  
 vom. Natr. mur. **Phosph. Samb.**  
**Sep. Stamm.**  
**PTHISIS OF LARYNX: Ambra.**  
 Carb. veg. **Caust.** Cupr. *Dros. Ign.*  
*Iod. Lach. Merc. Nux vom. Pulsat.*  
**Spong. Stamm. Sulph.**  
**AS OF A PLUG: Bar. Kali c.**  
**PRESSURE:** Bar. Bellad. Capsic.  
 Carb. veg. Cic. Graph.  
**AS IF RAW: Arg. Puls.**  
**ROUGHNESS:** Alum. Ambr. Ars.  
 Bell. Canth. Caps. Carb. veg. **Caust.**  
 Chin. Coff. Kali c. Mur. ac. *N. vom.*  
 Natr. mur. **Phosph. Phos. ac Plumb.**  
 Puls. Rhod. Rhus. Sabad. Sil.  
 Spong. Stamm. **Sulph. Zinc.**  
**AS IF SCRAPPED: N. vom. Pulsat.**  
*Sabad. Veratr.*  
**SCRAPING:** Alumin. Carbo veg.  
 Ign. Kali c. Natr. mur. Nitr. acid.  
 Rhus. Sabad. **Spong. Staph.**  
**SENSITIVENESS: Bell. Laches.**  
 Phosph. Sulph. Hepar. sulph. *Iod.*  
 Phosph. Sep. **Spong. Zinc.**  
**SIMPLE PAIN: Acon. Canthar.**  
 Hep. s. *Iod. Lach. N. vom. Spong.*  
**AS OF A SOFT BODY: Dros.**  
**SORE FEELING: Arg. Bry. Carb.**  
 veg. **Caust. China. Graph. Ign. Iod.**  
 Kali c. Natr. mur. Puls. *Sep.*  
**SPASM: Mosch. Veratr.**  
**STITCHES:** Capsic. China. Dros.  
 Hyosc. Iod. Kali c. Nitr. ac. **Phosph.**  
 Spig. Zinc.  
**AS IF STOPPED UP: Spong.**  
**LIKE VAPOR OF SULPH.: Mosch.**  
**SWELLING: Iod. Sil.**  
**AS IF SWOLLEN: Caps. Iod.**  
**TEARING: Ign.**  
**TENSION: Spong.**  
**TICKLING: Calcar. Carb. veg. Con.**  
 Hep. s. *Ipec. Merc. Sabin. Zinc.*

TINGLING: Con. *Dros.* Graphit.  
Iod. *Kali c.* *Natr. mur.* Sep. Zinc.

VOICE, raised: Stann.

—impure: Baryta. Carbo veg. Caust.  
Graphit. Merc. *Natr. mur.* Sulph.

### 2. Trachea.

BURNING: Euphorb. Phosphor.  
Rhus. Sulph. Zinc.

COLDNESS: Camph. Sulph.

AS IF CONSTRICTED: Ars. Ignat.

*Ipec. Mosch. N. vom. Puls. Rhus.*

AS IF CONTRACTED: *Coccul.*  
Lach. Staph.

COUGH, desire to: Acon. Arg. Arn.  
*Asa fet. Bryon. Cann. Cham.*

China. Cina. Cocc. Croc. Ferr. Hy-  
osc. Ignatia. *Ipec. Nur vom. Puls.*  
Sabina. Spig. Saph. Veratr.

CROUP: Hep. Phosph.

DRYNESS: Alum. Carbo veget.  
Caust. Cina. Phosph. *Puls. Rhod.*  
Sep. Sulph. Zinc.

FEELING OF: Camph. *Causticum.*  
Phosph. *Puls. Stann.*

HEAT: Iod.

INFLAMMATION: Acon. Capsic.

Con. *Drosera.* Iod. *Ipecac. Spong.*

ITCHING: Ambr. N. vom. Puls.

MUCUS, accumulated: Alumina.  
*Arg. Aur. Bar. Bell. Calc. Camph.*  
*Cann. Capsicum. Caust. Coccul.*  
*Cuprum. Hepar s. Hyosc. Ignatia.*  
*Iod. Lye. N. vom. Natrum mur.*  
*Nitric ac. Op. Phosphor. Plumb.*  
*Puls. Samb. Stann. Sulph. Zinc.*  
(See larynx.)

NUMB FEELING: Aco.

SIMPLE PAIN: Camph. Capsic.  
Carbo an. Chin. Ign. *N. vom.*  
Phosph. *Puls. Spong.*

PHTHISIS OF TRACHEA: *Aco.*

*Arg. Arn. Calc. Caust. Chamom.*  
*Cuprum. Dros. Ferr. Hep. Lye. N.*  
*vom. Nitric ac. Phosph. Puls. Rhus.*  
*Spong. Stann. Sulph. Veratr.*

PRESSURE: Bar. Graph. Phosph.  
Thuj.

ROUGHNESS: Alum. *Carbo veg.*  
Caust. Dig. Graph. *Iod. Kali c.*  
*Mur. ac. N. vom. Natrum mur. Ni-*  
*tric ac. Phosphor. Plumb. Puls.*  
*Rhodod. Rhus. Stann. Sulph. Zinc.*  
(See larynx.)

AS OF A FOREIGN BODY: Cann.  
Cic. Hyosc.

SCRAPING: Alum. Antim. crud.  
Canth. Carbo veget. Caustic. Graph.  
Hep. s. *Kali c. Lye. Mur. ac. Nitr.*  
*ac. Pulsatilla. Stann. Sulph.*

AS IF SCRAPED: N. vom. Puls.  
Rhus. Veratr.

SENSITIVENESS: Phosph.

SHOCKS: Bry. Cina.

AS IF GONE TO SLEEP: Aco.

AS IF SORE: Ant. crud. *Bryon.*  
*Cann. Caust. Cham. China. Iod. N.*  
*vom. Natrum muriat. Phosph.*  
*Plumbum. Rhus. Sil. Stann.*

STITCHES: Ant. crud. Arg. Bar.  
Bell. Caps. *Ipec. Thuj.*

AS IF STOPPED UP: Rhus.

AS OF VAPORS OF SULPH.:  
Puls.

TICKLING: Aconit. *Arn. Capsic.*  
*China. Ferr. Ipec. N. vom. Puls.*  
*Rhus. Sabin. Veratr.*

TINGLING: Arn. Calc. *Carbo veg.*  
*Dros. Euphorb. Iodine. Kali c.*  
*Lye. Petr. Phosphor. Platina. Sep-*  
*ie. Sil. Stann. Thuj.*

AS IF TORN: Staph.

## XXI. EXTERNAL NECK AND NAPE OF THE NECK.

Sensations.

### 1. Neck.

BLOTCHES: *Sec. corn.*

BOILS: Arn. Caust. Sep.

BURNING: Ferr. Ign.

AS IF BRUISED: Arn. Cic. Hep  
s. Sabin.

COLD FEELING: Phosph.

- CRAMP:** Cic.  
**CUTTING:** Graph. Ruta. Samb.  
**DRAWING:** Aco. *Ant. crud.* Arn.  
 Asa f. Bell. Bry. Camphor. Cantharis. Chin. Cic. Coccul. Croc. Dule. Graph. Kali. Nux vom. Natr. mur. Nitr. ac. Ph. ac. Puls. Rhod. Sabin. Spig. Spong. Staph. Veratr.  
**ERUPTION:** Ant. crud. Ars. Aur. Bry. Canth. Dig. Hep. sulph. Merc. Ph. ac. Puls. Spig. Spong. Staph. Thuja. Veratr.  
**AS IF THE FLESH WERE DETACHED:** N. vom.  
**GLANDS, boring in:** Bell. Pulsat. Sabad.  
 —pressure in: Aur. Bell. Chin. Cina. Coccul. Ign. Mercur. Rhus. Stram.  
 —simple pain in: Alum. Ambra. Arn. Bry. Calcar. Carbo veget. Caust. China. Cic. Con. Graph. Hell. Ignat. Kali c. Lye. Merc. N. vom. Natr. mur. Nitr. ac. Phos. Ph. ac. Pulsatilla. Rhus. Selen. Sep. Sil. Spig. Spong. Stann. Staph. Thuja.  
 —suppuration: Bell. Hyosc. Sil.  
 —sensitiveness: Arnic. Aurum. Spong.  
 —inflammation: Bar. Bell. Canth. Kali c. Nitric ac. Plumb. Veratr.  
 —swelling: Alum. Ambra. Arg. Arn. Asa f. Aur. Bar. Icij. Bry. Calc. Camph. Canth. Carbo veg. Cham. China. Cic. Coccul. Con. Duleam. Ferr. Graph. Hepar s. Ign. Iod. Lye. Merc. Mur. ac. Natr. mur. Nitr. ac. Petr. Phosph. Ph. ac. Plumb. Puls. Rhus. Sabad. Sep. Sil. Spigel. Spong. Stann. Staph. Sulphur. Thuja. Veratr. Zinc.  
 —feeling of: Spong. Staph.  
 —hard swelling: Coccul. Plumb. Rhus. Spig. Staph.  
 —itching: Con. Ant. crud.  
 —tickling: Kali c.  
 —pinching: Bry. Veratr.  
 —creeping: Con.  
 —as if air passed through: Spongia.  
 —as if excoriated: Con.  
 —as if pressed together: Ign.  
**GOITRE:** Ambr. Spong.  
 —as if swollen: Spong.  
 —large: Calc. Carbo an. Caust. Iod. Kali c. Lycop. Natr. mur.  
 —pressing: Spong.  
 —hard: Iod. Spong.  
 —movements in: Spong.  
 —pressing out: Spong.  
 —as if alive: Spong.  
 —painful: Iod. Plat.  
 —stitching: Iodine. Spongia. Sulph.  
 —larger: Iod.  
 —constriction in: Iod.  
**HEAD DRAWN TO ONE SIDE:**  
 Chin. Cupr. Hyosc.  
**HEAT:** Calc. Caust. Cham. Ign. Sep. Sulph.  
**ITCHING:** Alum. Bry. Carbo veg. Ign. Natrum mur. Nitric ac. Op. Puls. Rhus. Stann. Thuja.  
**LAMENESS:** Dig. Lye. Sulph.  
**PAIN:** laming: Cocc.  
 —rheumatic: Aco. Iod. Rhod. Staph.  
 —as of sore: Bry. Cic. Veratr.  
 —in lower vertebrae: Con.  
 —simple: Bell. Bry. Calc. Caps. Caust. Ferr. Graphit. Kali c. Lach. Nux vom. Phosph. Ph. ac. Sabin. Sil. Zinc.  
**AS IF PRESSED OUT:** Spong.  
**PRESSING:** Sil.  
**PRESSURE:** Aco. Ant. crud. Arg. Arn. Aur. Bell. Calc. Cann. Carbo veg. Caust. Ign. Kali c. Lach. Lye. Nitr. ac. Ph. ac. Sabin. Spong. Staph. Veratrum. Zinc.  
**RESTLESSNESS:** Thuja.  
**SCRAPING:** Ars.  
**SLEEP, gone to:** Carbo an.  
**SPASM:** Ant. crud. Spong.  
**SPOTS, yellow:** Iod.  
 —red: Bell. Carbo veg. Coccul. N. vom. Sep. Stann.



- STIFFNESS:** Alum. Ang. *Argent.*  
 Ars. Bell. **Bryon.** Calcar. Camph.  
 Carbo an. *Causticum.* China. Cic.  
 Coccul. Croc. Cupr. Dig. Ferr.  
 Graph. Hell. Lyc. Merc. Natr. mur.  
 Nitric ac. Petr. Phosph. Phosph.  
 ac. **Rhus.** Sil. Spong. Staphys.  
 Thuj. Veratr. Zinc.
- STITCHES:** Aco. Ant. crud. Aur.  
 Bell. Bry. *Canth.* Chin. Cina. *Coc-*  
*cul.* Cupr. Dig. *Graphites.* Hep. s.  
 Kali c. Phos. Samb. Spig. **Spong.**  
*Staphys.* Thuj. Veratr. Zinc.
- SWEAT:** Cann. Cham. Coff. Ipec.  
 N. vom. *Rhus.*
- SWELLING,** of bones: Calc.
- SWELLING:** Alum. Ars. Bell. Calc.  
 Caustic. Cic. Iod. Lyc. Merc. Nitr.  
 ac. Phos. *Rhus.* Sil. Zinc.
- external: Alum. Arn. Ars. Bar.  
 Caustic. Croc. Hyosc. Iod. Lyc.  
 Puls. Rhod.
- hard: Caust. Lyc. N. Vom.
- TEARING:** Arn. Aur. Carbo veg.  
 Cham. Cupr. Iod. Kali c. Lyc.  
 Merc. Phos. Plumb. *Sabin.* Selen.  
 Spong. *Staph.* Sulphur. **Zinc.**
- TENSION:** Arg. Arn. Bar. Bell. Bry.  
 Calc. Camph. Caustic. Cic. Dig.  
 Graph. Iod. Plumb. Puls. *Rhod.*  
*Rhus.* Spigelia. Spong. Staph.  
 Sulph. Zinc.
- THROBBING OF CAROTIDS:**  
 Opium. Spong.
- of arteries: Bell. **Hepar s.** Op.  
 Spong.
- AS IF TIED TOO FAST:** Arn.
- TINGLING:** Spong.
- TWITCHINGS:** Canthar. *Spongia.*  
 Zinc.
- convulsive: Phosph.
- ULCERS:** Ars. Hyosc. **Lycop.** Sec.  
 corn.
- ULCERATIVE PAIN:** Graph. Puls.
- VEINS,** swelling of: Op. Thuj.
- WEAKNESS:** *Arnica.* Coccul. *Staph.*  
 Veratr.
- AS FROM A WRONG POSITION:**  
 Dulc. Thuj. Zinc.
2. *Nape of the Neck.*
- BEATING:** Con.
- BLOTCHES:** Hep.
- BOILS:** Arn. Sil.
- BORING:** Bar.
- BURNING:** Arn. Bar. Calcarea.  
 Carbo veget. Ignatia. *Mercur.* Ph.  
 ac.
- COLDNESS,** feeling of: Sulph.
- CONTRACTION:** Puls.
- CRACKING:** Spong.
- CRAMP:** Ant. crud.
- CRAMPY FEELING:** Thuj. Sil.
- CRAMPY STIFFNESS:** Zinc.
- CRAWLING:** Dulc.
- CUTTING:** Dig.
- DRAWING:** Alum. Ambra. Ant.  
 crud. Asa foet. Bell. Camphor.  
 Cann. Caps. Chin. Coloc. Con. Dig.  
 Hyosc. Kali c. **Lycop.** Merc. Mosch.  
 Nux vom. Ph. ac. Plumb. *Pulsatilla.*  
*Rhodod.* *Rhus.* Ruta. Sep.  
*Staph.* Sulph. Thuj. Zinc.
- ERUPTION:** Bar. Bellad. Bryon.  
 Caust. Cham. **Hep.** Lycop. Sep. Sil.  
**Staph.**
- GLANDS:** see Neck.
- GRASPING:** Lyc.
- HEAT:** Ign. Lach. Phosph.
- HERPES:** Hyosc.
- ITCHING:** Carb. veg. Nitr. acid.  
 Rhodod. *Rhus.* Sep. Sil. *Staph.*
- LAMING PAIN:** Cina. Nux vom.  
 Spig. Staph. Veratr.
- AS OF A LOAD:** N. vom. *Rhus.*
- AS IF THE FLESH WERE**  
**LOOSE:** Aco.
- NAPE OF NECK,** stiff: Aconit. Arg.  
 Ars. Bar. Bell. Bry. Calc. Camph.  
 Canth. Caps. Carb. an. Caust.  
 Chin. Coloc. Dig. Dros. Dulc.  
 Graph. Hell. Hyosc. Ign. Kali c.  
 Lach. Lyc. Merc. N. vom. Natr.  
 mur. Nitr. ac. Petr. Phos. Ph. ac.  
 Plat. Puls. Rhod. *Rhus.* Sec. corn.

Sep. Sil. Spigel. Spong. Stann.  
*Staph. Sulph. Thuj. Veratr. Zinc.*  
**PAIN**, crampy: Arn.  
 —rheumatic: *Acon. Asa f. Graphit.*  
*Iod. Merc. Nux vom. Puls. Rhod.*  
*Rhus. Staph. Veratr.*  
 —simple: *Acon. Bry. Cann. Chin.*  
*Dulc. Graph. Hyosc. Ipec. Kali.*  
*Merc. Nux vom. Natr. mur. Petros.*  
*Phosphor. Rhodod. Sabad. Sep.*  
*Spigel. Stann.*  
 —as if tired: *Rhus.*  
 —ulcerative: *Puls.*  
**PRESSURE**: *Ambr. Asa f. Bar.*  
*Bell. Bry. Carb. veg. Coccul.*  
*Coloc. Dig. Euphorb. Graph.*  
*Laches. Lycop. Merc. Mosch.*  
*Natr. mur. Phosph. Ph. ac. Rheum.*  
*Rhus. Samb. Spong. Staph. Thuj.*  
**PULLING IN MUSCLES**: *Coloc.*  
**PUSTULES**: *Staph.*  
**RASH**: *Caust.*  
**SARCOMA**: *Bar. Calc.*  
**SENSITIVENESS**: *N. vom.*  
**AS IF GONE TO SLEEP**: *Rhus.*  
*Spig.*  
**SPOTS**, yellow: *Iod.*  
 —red: *Carb. veg. Sep. Stann.*  
**STEATOMA**: *Bar. Puls.*

**STITCHES**: *Acon. Alum. Arn. Bar.*  
*Bellad. Calc. Camph. Cann. Chin.*  
*Coccul. Graph. Ign. Merc. Phosph.*  
*ac. Puls. Rhus. Sepiæ. Stann.*  
*Staphys. Sulph.*  
**AS IF STRAINED**: *Dulc. Nux*  
*vom. Puls. Zinc.*  
**SWEAT**: *Chin. N. vom. Sulph.*  
**AS IF SWOLLEN**: *Sep.*  
**TEARING**: *Asa f. Camph. Canth.*  
*Carb. veg. Graph. Ign. Kali c.*  
*Nux vom. Natr. Phosph. Plumb.*  
*Sil. Spig. Sulph.*  
**TENSION**: *Alumin. Arnic. Aur.*  
*Bar. Bryon. Calcar. Camph. Canth.*  
*Carb. an. Caust. Con. Dig. Euphorb.*  
*Graph. Hyosc. Iod. Ipec. Kali c.*  
*Mosch. Nitr. acid. Plat. Plumb.*  
*Pulsat. Rhus. Sep. Sil. Staph.*  
*Sulph. Thuj. Zinc.*  
**TETANUS**: *Op.*  
**TWITCHING**: *Asa f. Caps. Chest.*  
*Natur. mur. Ph. ac. Sulph.*  
**MUSCLES**, twitching of: *Arg.*  
**ULCERS**: *Sil.*  
**UNSTEADINESS**: *Acon.*  
**WEIGHT**: *N. vom. Petr. Phos.*  
*Rhus. Sabin. Samb.*

## XXII. CHEST.

### Sensations.

#### 1. Internal Chest.

**ANXIETY**: *Acon. Arn. Asa f. Bry.*  
*Camph. Cann. Caps. Chin. Coccul.*  
*Ignat. Lach. Mosch. N. vom. Pul-*  
*sat. Rhus. Samb. Sec. c. Spig.*  
*Spong. Staph. Valer. Veratr.*  
**AS IF A BAND AROUND**: *Sabad.*  
*Sabin.*  
**BLOOD**, of erethism: *Alum. Carb.*  
*veg. N. vom. Plumb. Rhod. Sep.*  
*Spong. Thuj.*

**AS IF THE BLOOD DID NOT**  
**CIRCULATE**: *Sabad.*  
**AS IF BOUNDING**: *Croc.*  
**BORING**: *Aconit. Alum. Asa f.*  
*Cina. Kali c. Mur. ac. Ph. ac. Rhus.*  
*Spig. Staph. Thuj.*  
**BURNING**: *Acon. Alum. Ambr.*  
*Ant. crud. Arg. Arn. Ars. Asa f.*  
*Bar. Bell. Bry. Calc. Canth. Carbo*  
*veget. Caust. Chamom. Chin. Cic.*  
*Cina. Coccul. Coff. Con. Dros.*  
*Ferr. Graph. Hyosc. Ign. Iod. Lach.*

**Lyc. Merc. Mosch. Mur. acid Nux vom. Phosph. Ph. ac. Plat. Ruta. Sabad. Sabin. Sec. corn. Sep. Spong. Stann. Sulph. Zinc.**

**CATARRH:** Arn. Cann. Ign. *Nux vom.*

**CHILLINESS:** Bry. **Natr.**

**AS IF CONCUSSED:** Rhus.

**COOLING, pleasant:** Ruta.

**CONSTRICTION:** *Aconit. Alumina. Arn. Ars. Asa f. Bell. Cann. Caps. Carb. an. Cham. Coccul. Coloc. Cupr. Digit. Droser. Ferr. Hell. Ignat. Mosch. Nux vom. Natr. mur. Op. Phosph. Ph. ac. Puls. Plat. Rhodod. Rhus. Ruta. Spig. Stann. Stram. Sulph. Veratr.*

**CRAMPY PAIN:** Puls. Veratr.

**CRAMPY FEELING:** *Aco. Bell. Bry. Canth. Carbo. an. Cham. Cina. Dule. Hyosc. Kali c. Mur. ac. Nux vom. Plat. Rhod. Stann. Thuja. Veratr.*

**CUTTING:** Alum. Arg. Arn. *Aur. Bell. Calc. Canst. Chin. Con. Dig. Dule. Kali c. Lyc. Merc. Mur. ac. Ph. ac. Plat. Pulsat. Ruta. Sabin. Samb. Spigelia. Spong. Stann. Sulph. Veratr. Zinc.*

**DIGGING:** Arnica. Cann. Cina. Dule. Ferr. Petr. Stann.

**AS IF DILATED:** Bry. Stann.

**DRAWING INWARD:** Cham.

**DROPSY:** Acon. Ambra. Arn. Ars. Bry. Caps. Chin. Ferr. Hell. Ipec. Kali carb. Op. Rhus. Sabad. Spig. Veratr.

—of chest: Ars. Carbo veg. Coloc. Con. Dig. Dule. Kali c. Lyc. Mur. ac. Stann.

**DRYNESS, feeling of:** Alumina. Canth. Ferr. Phosph. Stram.

**AS IF EMPTY:** Coccul. Stann.

**AS IF FALLING:** N. vom.

**FERMENTING:** Phosph.

**FULLNESS:** Acon. Antim. crud. Arn. Bar. Canth. Caps. Con. Ferr.

Ign. Lyc. Mosch. Nitr. ac. **Phosph. Puls.** Rhus. Ruta. Sabad. Sabina. Sepiæ. **Sulph. Veratr.**

**GNAWING:** Arg. Ruta.

**GRIPING:** Veratr.

**GURGLING:** Cina. Kali c. Natr. mur. Ruta.

**HAMMERING:** Phosph.

**HEAT:** Arn. Ars. Aur. *Bellad. Bry. Calc. Canst. Chin. Cic. N. vom. Nitric ac. Opium. Puls. Rhus. Ruta. Spongia. Stann. Sulph.*

**HEAVINESS:** Acon. Alum. Bar. Bry. Calc. Iod. *Phosph. Plat. Rhod. Sabad. Samb. Sepiæ. Staph. Sulph. Zinc.*

**INFLAMMATION:** Aconit. Arn. Bry. Cann. *Hyosc. N. vom. Puls. Rhus. Ruta. Sec. corn. Spong.*

**ITCHING:** Carbo veg. Kali carb. Phosph. Ph. ac.

**JERKS:** Cann. Croc. Con. Lyc. Valer.

—as if living: Croc.

as if loose: Bry.

as if the lungs adhered: Euph. Thuja.

**LUNGS** as if less dilatable: Asa f. Bry. Cina.

—suppurating: Plumb. Puls.

—inflammation of: Aco. Bell. Bry. Lyc. Phosph. Puls. Rhus. Sepiæ. Sulphur. Tart. emet.

—phthisis of: Bryon. Calcar. Carbo veg. China. Con. Dule. Ferr. Graph. Iod. Kali c. Lyc. Natrum mur. Phosph. Pulsat. Ruta. Samb. Sep. Spig. Stann.

**NAUSEA:** Acon. Arg. Asa foet. Bry. Croc. Nux vom. Rhus. Staph.

**PAIN, as if excoriated:** Alum. Ars. Bar. Bry. Calc. Carb. veg. Caust. Cic. Cina. Graph. Ipec. Kali c. Lyc. Merc. Mur. ac. Natrum mur. Nitric acid. Phosph. Phosph. ac. Rhus. Sabina. Sep. Sil. Spongia. Stann. Staph. Sulph. Valer. Zinc.

—as if bruised: Aco. Alum. Ambr.

Arn. Bar. Camph. Caust. Chamom.  
Chin. Con. Ferr. Kali c. Merc.  
Phosph. Rhod. Spig. Spong. Stannum.  
Thuj. Zinc.

—as if flying to pieces: Bry. Cina.

—drawing: Asa f. Cann. Capsic. Carbo veg. Cham. Chin. Coccul. Con. Digit. Dule. Kali c. Nux vom. Nitric ac. Op. Plat. Puls. Ruta. Sep. Sil. Spig. Spong. Stann.

—simple: Alum. Arn. Ars. Bar. Calc. Caps. Carbo anim. Carbo veg. Caustic. Cham. Chin. Cina. Co'oc. Conium. Croc. Dule. Ferr. Graphites. Iod. Lye. Mosch. Mur. acid. Nitric ac. Phosph. Pulsat. Rhod. Ruta. Selen. Sep. Sil. Spig. Spong. Stann. Sulphur. Veratr. Zinc.

PINCHING: Alum. Bellad. Carbo veg. Cina. Dule. Ign. Kali c. Phos. ac. Samb. Spig. Spong. Thuj.

PRESSING: Alum. Ambra. Bry. Graph. Ign. Nitr. ac. Phosph. Sulph. Veratr.

—asunder: Euphorb.

PRESSURE FROM WITHOUT: Cann. Chin. Coccul. Ign. N. vom.

— —within: Arg. Asa f. Bell. Bryon. Cina. Dule. Valer. Zinc.

—as from a load: Arg. N. vom. Rheum. Sabad. Samb. Spig.

AS IN THE LOWER PART OF THE CHEST: Alum. Arn. Asa foet. Chin. Cic. Croc. Hyosc. Plumbum. Ruta. Sabad. Zinc.

PULSATING: Alum. Bryon. Dig. Dule.

AS IF RAW: Ambr. Arn. Arsen. Bryon. Chin. Coccul. Dig. Hell. N. vom. Natr. mur. Rhus. Zinc.

RESTLESSNESS: Bell. Chin. Staph. Thuj.

RUSH OF BLOOD: Acon. Arn. Bry. Carbo veget. Coccul. Cupr. Ferr. Hyosc. Nux vom. Natrum mur. Puls. Rhod. Sep. Spong. Thuj.

SHOCKS: Aconit. Calc. Cann. Croc. Dule. Mur. acid. Plat. Ruta.

SHUDDERING: Acon.

SPASM: Aconit. Arg. Asa foet. Bry. Calc. Cham. Cina. Coccul. Coff. Cupr. Dig. Ferr. Ipec. Kali c. Lye. Mosch. Nitr. ac. Petr. Phos. Puls. Sec. corn. Sep. Sulph. Thuj. Zinc.

STITCHES, in left side: Aconit. Alum. Ant. crud. Arg. Arn. Asa f. Bell. Bry. Calc. Camphor. Cann. Canth. Caps. Carb. veg. Caust. Chin. Cic. Cina. Coccul. Con. Croc. Dig. Dule. Euphorb. Graph. Hell. Ign. Ipec. Kali c. Lye. Merc. Mosch. Mur. ac. Natr. mur. Phosph. Ph. ac. Plat. Plumb. Puls. Rhus. Ruta. Sabad. Sabin. Samb. Sep. Spigel. Spong. Stann. Staphys. Sulph. Thuj. Valer. Veratr. Zinc.

—in right side: Acon. Alum. Ambr. Ant. crud. Arg. Arn. Asa f. Bell. Bry. Canth. Carb. an. Carb. veg. Caustic. China. Cina. Coccul. Coloc. Con. Croc. Dig. Dule. Graph. Hyosc. Ign. Iod. Kali carb. Merc. Natr. mur. Nitr. ac. Op. Phosph. Ph. ac. Plumb. Rhus. Ruta. Sabad. Sep. Sil. Spig. Spong. Stann. Staph. Sulph. Thuj. Veratr. Zinc.

—in middle of chest: Aco. Alum. Ant. crud. Bry. Cham. Chin. Iod. Phosph. Plumb.

—in diaphragm: Spig.

—in sternum: Acon. Arg. Arn. Aur. Bell. Bry. Calc. Canth. Capsic. Caustic. China. Con. Dule. Ferr. Graph. Hep. Lye. Natr. mur. Nitr. ac. Phosph. Ph. ac. Plumb. Sabin. Spig. Sulph.

—from the chest through the back: Acon. Ambr. Bryon. Canth. Carb. Carb. veg. Chin. Coccul. Ferr. Lycop. Plumb. Sabin. Sil. Spig. Sulph.

—from within: Argent. Asa f. Bry. Canth. Carb. veg. Chin. Muriat. ac.



- Nitric ac. Sabad. **Spig.** Spong.  
*Valer.*
- AS IF STOPPED UP: Bry.
- TEARING: Arg. Canthar. *Carbo veg.* Canst. Con. *Dulc.* Graph. Kali c. Mere. Natr. mur. Op. Petr. Phosph. Puls. Rhus. *Spig.* Stram. Zinc.
- TENSION: Arg. *Ars.* Bell. Bry. *Cann.* Caustic. Cham. Cic. *Coccul.* Con. Dig. *Dulc.* Euphorb. Graph. Ign. Lye. Mnr. acid. N. vom. Natr. mur. Phosphor. Pulsat. Rheum. Rhod. Rhus. Ruta. *Sabin.* Sep. *Spig.* Stann. *Staph.* Sulph. Zinc.
- TROBBING: Acon. Asa f. Bar. Bell. Bry. *Cann.* Caps. Chamom. Coff. Digit. Graph. Ign. N. vom. Phosph. Sil. Sulph. Thuja. Veratr. Zinc.
- TICKLING: Bar. Cham. Chin. Kali carb. Phosph. Stann. Veratr.
- AS IF TOO TIGHT: Hell. *Pulsat.* *Spig.*
- TIGHTNESS, feeling of: Puls.
- TINGLING: Acon. Arsen. Coloc. Phosph. ac. Sep. *Spig.* Spong. Stann. Thuja.
- TREMBLING: Kali carb. Phosph. Ruta. *Sabin.*
- TWITCHING: Cina. Coloc. Croc. Dulc. Kali c. Lye. Natr. mur. Sep. *Spig.* *Valer.*
- ULCERATIVE PAIN: Bry. Puls. *Staph.*
- WARMTH: Bry. *Coff.* Hell. Nux vom. Veratr.
- unpleasant: Alum. Euphorb. Natr. mur.
- feeling of: Mere.
- WEAKNESS: Iod. Kali c. Plat. Rhus. Stann. Sulph.
- feeling of: *Carbo veg.* Chin. Plat. Stann. *Staph.*
- AS IF WEARY: Arn. Carb. *veg.* Spong.
- WRENCHING: Samb.
2. External Chest.
- BLUE SKIN NEAR CLAVICLE: Thuja.
- BOILS: Arn. Chin.
- BURNING: *Ambr.* Arsen. Asa f. Bar. Bell. Canth. Caps. Croc. Digit. Droser. *Euphorb.* Ferr. *Mur. ac.* N. vom. Phosph. Ph. ac. Plat. Rheum. Rhus. Selen. *Sulph.* Zinc.
- BONE-PAIN: Chin.
- CHILLINESS: *Spig.*
- CONTRACTION: Arn. *Daph.* Bry. Dig. N. vom. Op. Plat. Rhod. *Rhus. Spig.*
- CONTUSIVE PAIN: Ant. cr. Arn.
- CRACKLING: Rheum.
- CRAMPY FEELING: Acon. Arg. Calc. Cham. Cina. Dig. Dulc. Nitr. ac. Plat. Sep. Veratr.
- CREEPING: Arn. Dros.
- CREEPING CHILL: N. vom.
- DRAWING: Acon. Asa f. Carb. veg. Cupr. Dig. Dulc. *Lycop.* *Mur. ac.* N. vom. Puls. Rhus. *Spig.* Stann. Zinc.
- GNAWING: Arg. Calcar. Ruta. Spong.
- HEAT: Cham. Cic. Dig. Puls.
- HERPES: Ars. Lye. Petrol. *Staph.*
- INSENSIBILITY: Rhus.
- ITCHING: Alum. Ant. crud. Bar. Calcar. Canth. Capsic. Carb. v. Caust. Chin. Coccul. Con. Kali c. Lye. Natr. mur. Op. Phosph. Puls. Sep. Spong. *Staph.* Veratr.
- of the sides of chest: Alum. Arn. Canth. Cic. Nitr. acid. Spong.
- JERKING: China. Platin. Pulsat. Stann. Stram.
- LAMING PAIN: N. vom.
- PAIN, as if contused: Con. Dulc. Mere. *Mur. ac.* Natr. mur.
- as if sprained: Arn. Coccul.
- as if sore: Bar. Bryon. Sep. *Staph.* Veratr.
- as if bruised: Arn. Chin. Ign. Merc. N. vom. Natr. mur. Nitr. ac.

- Phosph.** Ph. ac. Rheum. Spig.  
Sulph.
- simple: Ant. er. *Bry.* Cann. *Cap-sic.* Chin. Cupr. **Dulc.** Natr. mur.  
Phosph. Ph. acid. Puls. Rhodod.  
Rhus. Sabin. Sep. **Silic.** Staphys.  
Sulph. Veratr.
- PECKING:** Ruta.
- PIMPLES:** Ant. erud. Aur. Bell.  
Bry. *Canth.* *Coccul.* Con. Hep. Ph.  
ac. *Plumb.* Rhus. Staph.
- PINCHING:** Nux vom. Phosphor.  
Rhod. Samb.
- PRESSURE:** *Alum.* Ambra. *Arg.*  
Arn. *Asa f.* Aur. *Bry.* *Camph.*  
Canthar. *Chin.* Cina. *Coccul.* Cupr.  
Dulc. *Dros.* Hyosc. N. vom. *Plumb.*  
Rheum. *Ruta.* *Sabin.* *Spig.* Stann.  
Staphys. **Sulphur.** Valer. **Veratr.**  
Zinc.
- from without: Rhus.
- PRICKLING:** Plat.
- PULLING:** Phosph.
- RASH:** Ant. erud. Staph. Valer.  
Veratr.
- REDNESS:** Aur. Bell.
- RHEUMATIC PAIN:** *Ambr.* **Bry.**  
**Spig.**
- RIBS RAISED:** **Spig.**
- SENSITIVENESS:** Cann. Canthar.  
N. vom. Sulph.
- SHUDDERING:** Chin. Cina. *Nur*  
*rom.* Plat. Ruta. **Spig.** Staph.
- AS IF TOO SHORT:** N. vom.
- GONE TO SLEEP:** Merc.
- SPASMS:** Cic. Puls. **Stram.** Veratr.
- SPOTS,** brown: Carbo veg.  
—yellow: Ars. **Phosph.**  
—red: Bell. Carbo veg. *Coccul.* Lye.  
Sabad.
- STITCHES:** Arn. *Asa foet.* Aur.  
Bell. *Bry.* Calc. *Camph.* Caun.  
*Canth.* *Caust.* Chin. *Coccul.* Con.  
Croc. *Dros.* *Dulcam.* Euphorb.  
Hep. *Mur. ac.* *Nur vom.* Nitr. ac.  
*Phosph.* Ph. ac. *Plumb.* Puls.
- Rheum. **Rhus.** *Ruta.* *Sabad.* *Sabin.*  
Sil. *Spig.* *Spong.* Stann. *Staph.*  
*Sulph.* Teuc. Veratr. Zinc.
- SWEAT:** *Arg.* Arn. Bell. Calc. *Canth.*  
*Chin.* *Coccul.* Euphr. Hep. Ipec.  
Lyc. Merc. Phos. Ph. ac. *Plumb.*  
Rhus. Sabad. Sec. corn. *Selen.* Sep.
- SWELLING:** Bryon. Calc. Can.  
**Dulc.** Iod. *Rhus.* Sep. Sil. **Sulph.**
- TEARING:** Ambr. **Bry.** *Camph.*  
Dulc. Iod. Kali c. Lye. Merc. N.  
vom. Rhod. Sabin. **Spig.**  
—near the clavicle: Lye. Stann.
- TENSION:** *Asa f.* Cham. China. Dig.  
Dros. *Dulcan.* *Euphorb.* Ferr. Iod.  
Merc. Mur. ac. N. vom. Natrum  
mur. **Phosph.** Puls. Rhodod. Rhus.  
*Sabina.* **Spig.** Stann. Thuj.
- TUBERCLES:** Cann. Caust.
- TWITCHING:** Merc. **Spig.**
- ULCERS:** Ars. Hep. **Sulph.**
- ULCERATIVE PAIN:** Bry. Puls.
- WARMTH:** N. vom. Rhus.
- WRENCHING:** Puls.
3. *Arille.* (*Arm pit.*)
- BURNING:** Carbo veg.
- CRAWLING:** Con. Mezer.
- DAMPNESS:** Carbo an. Sulph.
- DRAWING:** Bel. Sil.
- AS IF EXCORIATED:** Con.
- INDURATION:** Iod.
- INFLAMMATION:** Nitric ac. Petr.  
Phosph. Sulph.
- ITCHING:** Carbo an. Carbo veg.  
Caust. Con. Dig. Kali. *Phos.* Sep.
- PAIN GENERALLY:** Bellad. Car-  
bo veg. Con. Nitric ac. Sil.
- SENSITIVENESS:** Nitr. ac.
- STITCHES:** Arn. Con. Sulph.
- SUPPURATION:** Calc. Coloc. Hep.  
Petr. Sil. **Sulph.**
- SWEAT:** Dulc. Kali. Natr. mur.  
*Phosph.* Rhod. Sep. **Sulph.**
- SWELLING:** Bellad. Calc. *Phosph.*  
Iod. Hep. Lye. Natrum mur. *Ni-*  
*tric ac.* Petr. *Phosph.* Sep. **Sulph.**

## Breasts.

## 4. Mammary glands.

BLOTCHES: *Bell. Calc. Carb. Carbo an. Chamom. Con. Dulc. Graph.*

*Lyc. Phos. Ruta. Sil. Sulph.*

CANCER: *Arnica. Ars. Calcar. Carbo an. Carbo veg. Caust. Kali.*

*Lyc. Nitric ac. Phosph. Rhus. Sep. Sil. Sulph.*

CONTUSION: *Arn.*

CRAWLING: *Con.*

DRAWING: *Cham.*

ERYSIPELAS: *Aco. Bell. Bry.*

*Phosph. Sil.*

AS IF EXCORIATED: *Con.*

HARDNESS: *Ambr. Bryonia. Cham.*

*Con. Phosphor. Plumb. Sil. Sulph.*

HEAT: *Bell. Bry. Cann.*

INDURATION, see Tubercles.

INFLAMMATION: *Aconit. Arn.*

*Bry. Carbo veget. Cham. Con.*

*Phosph. Pulsat. Sil. Sulph.*

ITCHING: *Caust. Con. Kali. N. vom. Plumb. Rhus.*

MILK, bitter and yellow: *Rheum.*

—blueish: *Lach.*

—too fat: *Puls.*

—setting in: *Puls.*

—fever: *Acon. Arn. Bryo. Cham. Coff. Ign. N. vom. Op. Puls. Rhus.*

—excessive flow of: *Aconit. Chin.*

—vanishing of: *Agn. Bryon. Calc.*

*Cham. Puls. Rhus. Sec. corn. Zinc.*

—increase of: *Bryon. N. vom. Puls.*

—stoppage of: *Bell.*

—flow of: *Bell. Calc. Puls.*

PAIN, simple: *Cann. Chamom. Coloc.*

*Con. Mercur. Silic. Veratr.*

PRESSURE: *Bell. Ph. ac. Pulsat. Sabin.*

SHUDDERING: *Coccul. N. vom.*

TOO SMALL: *Cham.*

STITCHES: *Alua. Bar. Bellad. Con.*

*Nux vom. Natr. mur. Plumb. Sep.*

*Veratr. Zinc.*

SWELLING: *Bell. Bry. Cham. Con.*

*Dulc. Merc. Phosph. Plumb. Puls.*

*Ruta. Sabina. Sil. Sulph.*

TEARING: *Bar. Cham.*

TENSION: *Puls.*

ULCERS: *Hep. Merc. Phos. Sil. Sulph.*

ULCERATIVE PAIN: *Merc.*

WITHERING: *Chamom. Con. Iod.*

## 5. Nipples.

BURNING: *Cic. Graph. Sulph.*

CREEPING: *Sabin.*

DISCHARGE OF BLOOD AND

HUMOR: *Lyc. Plumb.*

HARDNESS: *Merc.*

INDURATION: *Bry.*

INFLAMMATION: *Aco. Bryon.*

*Cham. Phosph. Puls. Sil. Sulph.*

ITCHING: *Con. Pulsatilla. Rhus. Sabad.*

PAIN, simple: *Graphit. Nux vom.*

*Rheum. Sulph.*

RHAGADES: *Arn. Graphit. Sulph.*

SENSITIVENESS: *N. vom.*

SHOCKS: *Bry.*

SORENESS: *Arn. Calc. carbon.*

*Cham. Graph. Lyc. Puls. Sulph.*

SORE PAIN: *Calc. Zinc.*

STITCHES: *Camph. Cann. Coccul.*

*Ign. Lyc. Mur. ac. Rheum. Sabin. Sulph.*

SWELLING: *Merc.*

ULCERATION: *Cham.*

## 6. Heart and region of the heart.

ANXIETY: *Acon. Alum. Ambr. Ars.*

*Aur. Calc. Cann. Canth. Chamom.*

*Cina. Coccul. Croc. Cupr. Ferr.*

*Graph. Hell. Lyc. N. vom. Nitric*

*ac. Op. Phosph. Plumbum. Pulsat.*

*Rhus. Sec. corn. Sep. Sil. Stram.*

*Sulph. Veratr.*

BEATS OF THE HEART, inter-

mittent: *Bry. Chin. Digital. Kali.*

*Natr. mur. Sulph.*

—slow: *Arn.*

—quick: *Arn. Asa f. Sabin.*

—unequal: *Asa f. Sabin.*

—imperceptible: *Rhus. Verat.*

- stronger: *Ars. Aur. Calcar. Chin. Dig. Dulcam. Hyosc. Phosph. Sabina. Spigel. Veratr.*  
 —full: *Acon.*  
**BURNING:** *Carb. veg. Op. Puls.*  
**CONTUSIVE PAIN:** *Natr. mur.*  
**CRAWLING:** *Canth.*  
**DRAWING:** *Canth.*  
**EXCITEMENT, vascular:** *Carbo veg. Nux vom. Sulph.*  
**HEART, trembling of:** *Aur. Bell. Calc. Camph. Cina. Rhus. Sep. Spig.*  
 —throbbing in the region of the: *Ars. Bar. Calc. Hell. Lycop. Phosphor. Sep. Sil. Sulphur. Zinc.*  
**HUMMING:** *Spig.*  
**INFLAMMATION:** *Acon. Arsen. Bry. Cann. Coccul. Spig. Puls. Rheum.*  
**JERKING:** *Arn. N. vom. Plumb.*  
**OPPRESSION:** *Bell. Cham. Nux vom. Spig.*  
**PALPITATION, generally:** *Acon. Alum. Amb. Arn. Ars. Aur. Bar. Bell. Bryon. Calcar. Camph. Cann. Canth. Carbo an. Carbo veg. Caust. Cham. China. Coccul. Coloc. Con. Croc. Cupr. Dig. Graph. Hell. Ign. Iod. Ipec. Kali. Lye. Merc. Mur. ac. Natrum mur. Nitric ac. Nux vom. Petr. Phosph. Phos. acid. Plumb. Puls. Rhus. Sabad. Sabin. Secale corn. Sep. Sil. Spig. Spong. Staph. Sulph. Thuja. Valer. Veratr. Zinc.*  
 —with anguish: *Acon. Alum. Ars. Aur. Calc. Cann. Caust. Cham. Chin. Coccul. Coloc. Dig. Graph. Kali. Lye. Mosch. Natr. mur. Nux vom. Phosphor. Plat. Plumb. Puls. Sec. corn. Sep. Sil. Sulphur. Spigel. Thuja. Veratr.*  
 —without anxiety: *Carbo anim. Ipec. Sulph. Thuja. Zinc.*  
 —perceptible: *Plumbum. Rhus. Sabin. Veratr.*  
 —audible: *Camph. Dig. Spig.*  
 —spasmodic: *Sec. corn.*  
 —visible: *Con. Dulc. Graphites. Iod. Rhus. Secale corn. Spig. Sulph. Thuja.*  
**PAIN, simple:** *Cann. Cantharis. Cham. Puls. Ruta. Thuja.*  
**PRESSURE:** *Aco. Arn. Ars. Asa f. Bell. Cann. Canth. Cham. Con. Graph. Kali. Lye. Natr. mur. Nux vom. Pulsat. Rhus. Spig.*  
**QUALMISHNESS:** *Cham. N. vom.*  
**RUSH OF BLOOD:** *Acon. Asa f. Carbo veg. Cham. Ferr. Lye. Nux vom. Nitric ac. Phosph. Puls. Sep. Sulph.*  
**STITCHES:** *Arn. Aur. Calcar. Canth. Capsic. Carbo veget. Caust. Cham. China. Croc. Ign. Mur. ac. Nux vom. Nitric ac. Petr. Plumb. Rhus. Sep. Spig. Sulph. Valer. Zinc.*  
**TEARING:** *Canth. Lye.*  
**WARMTH:** *Cann. Veratr.*  
 —feeling of: *Rhod.*  
**WEAK FEELING:** *Rhus.*  
**WEIGHT:** *Croc. Puls.*

### According to Situation and Circumstances.

#### 1. Aggravated.

- IN THE OPEN AIR:** *Ambr. Bryon. Caust. China. Coccul. Coffea. Con. Euphorb. Graph. Ignat. Lye. Merc. Natr. mur. Nux vom. Rhus. Sabad. Sep. Spig. Stann. Staph.*  
**WHEN ASCENDING:** *Bell. Graph. N. vom. Sep. Thuja. Zinc.*  
 —the stairs: *N. vom. Rhus. Ruta. Spong. Staph.*  
**WHEN BREATHING:** *Acon. Ant. crud. Arg. Arn. Ars. Asa f. Aur. Bryo. Calc. Cann. Caps. Cnamom. China. Cina. Coccul. Dulc. Dros. Graphit. Hep. Hyosc. Lycop. Mercur. Natr. mur. Nitr. ac. Puls. Sep. Spig. Stann.*



WHEN DRAWING A LONG

BREATH: *Calc. Merc. Natr. mur.*

AFTER A COLD: *Acon. Bryon.*

*Carbo veg. Cham. N. vom. Rhus.*

IN THE COLD: *Rhus. Sabad.*

IN COLD AIR: *Aconit. Bryonia.*

*Carbo veg. Coccul. Rhus. Sabad.*

*Spong.*

BY CONTACT: *Acon. Arg. Arn.*

*Bar. Bry. Calc. Canth. Caps. Carbo*

*veg. Cham. Chin. Coccul. Cupr.*

*Dros. Dulc. Graph. Merc. Nur*

*vom. Phosph. Ph. ac. Plumb.*

*Rhod. Rhus. Ruta. Sabin. Spig.*

*Staph. Sulphur. Veratr.*

AFTER CONTUSIONS: *Arn. Puls.*

*Rhus. Ruta.*

WHEN COUGHING: *Aco. Alum.*

*Ambr. Ant. erud. Arn. Ars. Bar.*

*Bryon. Calc. Cannab. Caps. Carbo*

*veget. Caustic. Cham. Chin. Cina.*

*Coff. Con. Dig. Bros. Ferr. Iod.*

*Kali. Lye. Merc. Mur. ac. Natr. mur.*

*Nitric ac. N. vom. Phosph. Phosph.*

*ac. Puls. Rhus. Ruta. Sabad. Sa-*

*bina. Sep. Sil. Spigel. Spongia.*

*Stann. Staph. Veratr.*

AFTER COUGHING: *Cina. Ferr.*

IN DAMP WEATHER: *Carb. veg-*

*etab.*

DURING DIGESTION: *Lye.*

WHEN DRINKING: *Chin.*

AFTER DRINKING: *Arn. China.*

*Coccul. Con. Cupr. Nux vom.*

*Veratr.*

BY DRINKING COLD: *Thuj.*

AFTER DRINKING BEER: *Sep.*

— — wine: *Ant. erud. Nux vom.*

WHEN EATING: *Arsic. China.*

*Coccul. Ign. Phosph.*

AFTER EATING: *Aconit. Ambra.*

*Ant. erud. Arn. Asa f. Bry. Canth.*

*Caps. Carbo ac. Canth. Chamom.*

*Chin. Coccul. Con. Ferr. Hyosc.*

*Ign. Lye. Merc. Nur vom. Phos.*

*Puls. Rhus. Ruta. Sep. Thuj. Valer.*

*Veratr. Zinc.*

BY EATING WARM FOOD: *Euphorbium.*

BY GETTING WARM IN BED:

*Chamom. Puls. Rhus.*

BY EMOTIONS: *Phosph.*

BY BODILY EXERTIONS: *N.*

*vom. Rhus. Spong.*

AFTER EXPECTORATING: *Zinc.*

WHEN FALLING ASLEEP: *Sul.*

BEFORE THE FEVER: *Chin.*

DURING THE FEVER: *Acon.*

*Bryon. Chin. Ipec.*

—the chill: *Bry. Ipec. N. vom. Puls.*

*Rhus.*

—the heat: *Acon. Caps. China. Ipec.*

*Nux vom. Puls.*

AFTER A FRIGHT: *Acon. Cha-*

*mom. Ign. Op.*

BETWEEN THE INSPIRATION:

*Ign. Merc. Spig.*

WHEN LIFTING: *Bar. Kali. Lye.*

AFTER LYING DOWN: *Hell. Ig-*

*nat. Nux vom. Puls. Rhus. Sabad.*

*Stram.*

WHEN LYING DOWN: *Ant. erud.*

*Asa f. Calc. Canth. Carbo veg.*

*Cham. Ferr. Natr. mur. Nitr. ac.*

*Puls. Rhus. Selen. Sulph.*

BY MENTAL LABOR: *Ign. N.*

*vom. Sep.*

BEFORE THE MENSES: *Cupr.*

*Puls. Spong.*

DURING THE MENSES: *Bell.*

*Caustic. Cham. Graph. Phosphor.*

*Puls.*

DURING MOTION: *Acon. Alum.*

*Arg. Arn. Bell. Bry. Calc. Camph.*

*Cann. Capsic. Carbo veg. Cham.*

*Chin. Coccul. Con. Dig. Euphorb.*

*Ferr. Graphil. Hep. Ign. Iod. Lye.*

*Mercur. Natrum mur. Nitric ac.*

*Nux vom. Op. Phosph. Ph. ac. Puls.*

*Rhodod. Ruta. Sabina. Samb. Sep.*

*Spigel. Spongia. Stann. Staph.*

*Sulph. Veratr. Zinc.*

WHEN MOVING THE ARMS:

*Dig. Plumb. Puls.*

BY MUSIC: *Nux vom.* *Staph.*  
 DURING NOSE BLEED: *Carbo*  
*veg.*  
 WITH NAUSEA: *Bell.*  
 BY PRESSING ON THE ABDO-  
 MEN: *Asa f.*  
 BY EXTERNAL PRESSURE: *Ant.*  
*tim. erud.* *Bry.* *Chin.* *Cina.* *N.*  
*vom.* *Ruta.* *Spongia.* *Staphys.* *Valer.*  
 WHEN RAISING ONE'S-SELF:  
*Aco.* *Arg.* *Bry.* *Cann.* *Cic.* *Dig.*  
*Ign.* *Stann.* *Staph.*  
 WHEN RISING FROM BED: *Ant.*  
*erud.* *Plat.* *Stann.* *Staph.*  
 — —from a seat: *Sil.*  
 AFTER RISING: *Nux vom.* *Puls.*  
*Rhus.* *Spig.*  
 WHEN READING: *Chin.*  
 — —loud: *Coccul.*  
 DURING REST: *Arg.* *Arn.* *Bell.*  
*Caps.* *Cham.* *Chin.* *Ferr.* *Natr.*  
*mur.* *Phos. ac.* *Puls.* *Rhus.* *Ruta.*  
*Samb.* *Stann.*  
 IN THE ROOM: *Bry.* *Croc.* *Puls.*  
*Rhodod.* *Spig.*  
 BY RUNNING: *Bry.* *Cina.* *Nux*  
*vom.* *Sil.*  
 BY SINGING: *Stann.*  
 WHEN SITTING: *Arg.* *Ars.* *Asa*  
*fet.* *Bell.* *Calc.* *Caps.* *Carbo anim.*  
*Carb. veg.* *Chin.* *Cina.* *Coloc.* *Dros.*  
*Dule.* *Euphorb.* *Ferr.* *Merc.* *Mnr.*  
*ac.* *Phos.* *Puls.* *Rhus.* *Ruta.* *Sabad.*  
*Silic.* *Spigel.* *Spong.* *Stann.* *Staph.*  
*Sulph.* *Thuj.* *Valer.*  
 — —crooked: *Argent.* *China.* *Rhod.*  
*Rhus.* *Spig.* *Spong.*  
 — —erect: *Acon.* *Natr. mur.*  
 AFTER SLEEPING: *Aconit.* *Ambr.*  
*Bryon.* *Calcar.* *Chin.* *Coccul.*  
*Euphr.* *Ignat.* *Nux vom.* *Op.* *Rhenm.*  
*Sabad.*  
 BY SMOKING: *Cic.* *Ign.* *Spong.*  
*Staph.*  
 WHEN SNEEZING: *Acon.* *Bryon.*  
*Cina.* *Merc.* *Sil.*

WHEN STANDING: *Carb. an.* *Con.*  
*Euphorb.* *Natr. mur.* *Stann.* *Sulph.*  
*Zinc.*  
 BY MAKING A WRONG STEP:  
*Bry.* *Puls.* *Spig.*  
 BY STIMULANTS: *Stann.*  
 BEFORE STOOL: *Spig.*  
 DURING STOOL: *Spig.*  
 AFTER STOOL: *Sil.*  
 WHEN STOPPING THE  
 BREATH: *Dros.* *Merc.* *Spig.*  
 WHEN EXPIRING AIR: *Ambr.*  
*Ant. cr.* *Arg.* *Ars.* *Anr.* *Bry.* *Carb.*  
*veg.* *Cham.* *Chin.* *Cic.* *Cina.* *Ign.*  
*Iod.* *Mur. ac.* *Phosph. ac.* *Ruta.*  
*Sabad.* *Sep.* *Spigel.* *Stann.* *Staph.*  
*Zinc.*  
 WHEN INSPIRING AIR: *Aco.*  
*Ars.* *Arn.* *Aur.* *Bar.* *Bry.* *Calc.*  
*Camph.* *Cann.* *Canth.* *Caps.* *Carb. v.*  
*Caust.* *Cham.* *Chin.* *Cic.* *Cina.* *Coc-*  
*cul.* *Coloc.* *Con.* *Dule.* *Euphras.*  
*Hell.* *Hyosc.* *Iod.* *Kali.* *Lyc.* *Merc.*  
*Mur. ac.* *Natr. mur.* *Nitr. ac.* *Op.*  
*Phos. Ph. ac.* *Plat.* *Plumb.* *Pulsat.*  
*Rhus.* *Ruta.* *Sabad.* *Sabin.* *Sep.*  
*Sil.* *Spigel.* *Spong.* *Stann.* *Sulph.*  
*Valer.* *Veratr.* *Zinc.*  
 WHEN DRAWING A LONG  
 BREATH: *Acon.* *Arg.* *Arn.* *Bryon.*  
*Canth.* *Caps.* *Cina.* *Dros.* *Ign.* *Puls.*  
*Rhus.* *Sabin.* *Spig.*  
 WHEN STOOPING: *Acon.* *Alum.*  
*Arg.* *Arn.* *Asa f.* *Bry.* *Cann.* *Caps.*  
*Carb. veg.* *Chin.* *Coccul.* *Coloc.*  
*Dig.* *Dros.* *Hell.* *Ign.* *Merc.* *Nitr.*  
*ac.* *N. vom.* *Phos. Ph. ac.* *Puls.*  
*Rhodod.* *Rhus.* *Silic.* *Spigel.* *Spong.*  
*Stann.* *Staph.* *Valer.* *Zinc.*  
 WHEN STRAINING: *Rhus.*  
 WHEN TALKING: *Bry.* *Cann.*  
*Canth.* *Chin.* *Coccul.* *Ignat.* *Puls.*  
*Rhus.* *Stram.*  
 WHEN TALKING LOUD: *Carb. v.*  
*Kali.* *Mnr. acid.* *Natr. mur.* *Stann.*  
 BY TIGHT CLOTHES: *N. vom.*  
*Spong.*

BY TURNING TO THE RIGHT  
SIDE: Spig.

WHEN TURNING IN BED: Acon.  
Cann. Caps. Carb. veg. Nux vom.  
Staph.

BEFORE VOMITING: Cupr.

WHEN WAKING: Ant. cr. Arn.  
Dig. Euphr. Ign. Puls. Rhus. Sa-  
bad.

WHEN WALKING: Aconit. Arn.  
Bryon. Camph. Caps. Chin. Cic.  
Coccul. Ferr. Ign. Nux vom. Ruta.  
Spigel. Spong. Staph. Valer. Ve-  
ratr.

AFTER WALKING: Pulsat. Rhus.  
Valer.

WHEN WALKING IN THE OPEN  
AIR: Bry. Chin. Coff. N. vom.  
Rhus. Spig. Spong. Staph.

AFTER WALKING IN THE OPEN  
AIR: Ferr. N. vom. Rhus. Sabad.

WHEN WALKING FAST: Chin.  
Spig.

WHEN WRITING: Asa f. Chin.  
Coccul. Valer.

### 2. Relieved.

IN THE OPEN AIR: Bry. Natr.  
mur. Puls.

BY WARM AIR: Carb. veg.

BY BENDING BACK: Acon. Cann.  
N. vom. Puls.

BY BREATHING: Asa f. Cina.

BY EXPIRATIONS: Cina. Merc.

BY INSPIRATIONS: Cina. Merc.

BY DRAWING A LONG BREATH:  
Dig. Stann.

DURING CONTACT: Mur. ac.

AFTER DRINKING: Bry. Ferr.

AFTER EATING: Bry. Rhus. Sa-  
bad.

AFTER ERUCTATIONS: Ambr.  
Canthar. Kali. N. vom. Petr. Sep.  
Zinc.

AFTER EMISSION OF FLATU-  
LENCE: Spig. Stram. Veratr.

BY FRICTION: Calc.

WHEN LYING DOWN: Alum. Bry.  
Canth. Iod. Nux vom. Sabad.  
Zinc.

— on one side: Alum.

— on the back: Arn. Bry. Ign.  
Puls. Sabad.

— on the painful side: Ambr. Arn.

Bry. Cham. Ign. Nux vom. Puls.

— on the painless side: Ign. N.  
vom.

BY MOTION: Arg. Arn. Cham. Cina.  
Dros. Euphorb. Mur. ac. Ph. ac.  
Plumb. Puls. Rhus. Sabad. Sep.

BY PRESSURE EXTERNALLY:  
Asa f. Bry. Chin. Cina. Dros. Ign.  
Puls. Veratr.

DURING REST: Arn. Bry. Chin.  
N. vom. Sabin. Staph.

BY RISING: Canth. Carb. anim.  
Dulc. N. vom. Puls. Rhus.

IN THE ROOM: Bry. Cham. Nur  
vom.

BY SITTING UP: Alum. Asa f.  
China. Dig. Puls. Spig.

WHEN SITTING: Alum. Bry. Caps.  
N. vom.

WHEN STANDING: Chin. Cicut.  
Ruta.

BY STOOPING: Chin. Ign. Valer.

AFTER SWEAT: Canthar. Cham.  
N. vom. Puls.

WHEN WALKING: Chin. Cicut.  
Dros. Ferr. Mosch. Plumb. Puls.  
Rhus. Ruta. Staph.

## XXIII. BACK.

### Sensations.

1. Scapulae. (Shoulder Blade.)

BOILS: Amm. mur. Led.

BURNING: Acon. Bar. Carb. veg.  
Chel. Iod. Lyc. Sep. Sil. Sulph.  
Veratr.

- CHILLINESS: Alum. Rhus.  
 CONTRACTION: Chin. Lach. Lye.  
*Rhus. Viol. tric.*  
 CRAMPY FEELING: Baryt. Bellad. Kali. Merc. Rhus.  
 CRAWLING: Laur.  
 CUTTING: Calcar. carbon. Rhus. Sulph. ac.  
 DISLOCATION PAIN: Chin. Coloc. Mur. ac. Petr. Plumb. Rhod.  
 ERUPTION: Bell. Bryon. Caust. *Lyc. Merc. Phosph. Ph. acid. Squilla.*  
 GNAWING: Alum. Merc. Phos. ac.  
 HEAT: Mur. ac. Puls.  
 HEAVINESS: Menyanth.  
 ITCHING: Amm. mur. Arn. Bell. Daph. Laur. Mercur. Oleand. Spig. Stront.  
 PAIN, as if sore: Coloc. Plat.  
 — — bruised: Anac. Bar. China. Hell. Kali. Merc. *Natr. mur. N. vom. Sulph. Thuj.*  
 PRESSURE: Anac. Arn. Bellad. Bry. Calc. Caust. *Chin. Laur. Mur. ac. Seneg. Sil. Sulphur. Stann. Zinc.*  
 RIGIDITY: Ang. *Bellad. Caustic. Led.*  
 AS IF GONE TO SLEEP: Anac.  
 STITCHES: Alumin. Amm. mur. *Anac. Asa f. Aur. Bry. Bell. Bov. Camph. Cann. Canthar. Caps. Caust. Chin. Cina. Cocc. Colch. Dule. Ferr. Hep. Kali. Lach. Laur. Mur. acid. Natr. Natr. mur. Nitr. Nitric ac. N. vom. Plumb. Puls. Ran. bulb. Sabad. Samb. Sassap. Sepiæ. Spig. Spong. Stannum. Thuj. Zinc.*  
 TEARING AND DRAWING : Alum. Anac. Asa f. Aur. *Calc. carb. Carbo veg. Caust. Chamom. Dule. Lach. Lye. Mur. magn. Phos. Plumb. Rhod. Rhus. Sep. Stann. TENSION: Alum. Bar. Carbo an.*
- Coloc. *Colch. Kali. Kreosot. Natr. Rhus. Sep. Sil. Sulph.*  
 THROBBING: Baryt. Kali. Merc. *Phosph.*  
 TUBERCLES: Amm. mur.  
 TINGLING: Anac. Dule. Sabad. *Sil.*  
 TWITCHING: Calc. carb. Phosph. *Rhus. Squilla.*
2. Back.
- AS IF ALIVE: Plumb.  
 BORING: Aconit. Agar. Coccul. Spig. Thuj.  
 BURNING: *Acon. Agar. Arnica. Ars. Bar. Carbo an. Carbo veg. Chel. Lye. Merc. Mur. ac. Nitric ac. Nux vom. Phosphor. Plat. Sep. Sil. Sulph. Veratr.*  
 CHILL: Bellad. *Calc. carb. Dule. Lach. Lye. Nux vom. Phosph. Rhus. Sep. Sil. Stann. Sulph.*  
 COLD FEELING: *Carbo veget. Con. Mur. ac.*  
 CRAMPY FEELING: *Carbo vegetab. Euphr. Merc. Nitr. Puls.*  
 CRAWLING: Acon. Bell. Graphit. Laur. Natr. *Sec. corn.*  
 CURVATURE OF THE SPINE: Bell. Calc. carb. Lycop. Merc. Puls. *Rhus. Sil. Staphys. Sulph.*  
 CUTTING: Calc. carb. *Sep. Sil.*  
 DIGGING: Acon. *Sep.*  
 DISLOCATION-PAIN: Agar. *Arnica. Calcar. Cocc. Mur. ac. Rhus. Sulph.*  
 ERUPTION: Bar. Bell. *Calc. carb. Carbo veg. Caust. Cocc. Led. Merc. Natr. mur. Pulsat. Sel. Sep. Squilla. Sulph.*  
 HEAT: Con. Merc. *Natrum mur. Phosph. ac. Puls. Sulph.*  
 HEAVINESS: Ambra. Carbo veg. Phosph. Sep. Sulph.  
 ITCHING: Alumina. Amm. mur. Baryt. Calc. carb. *Causticum. Daphne. Laur. Kali. Lycop. Merc.*



Natr. *Nitric ac.* Phos. Sassap. Sil.  
Sulph. Thnj.

JERKS: Calc. carb. Staph.

LAMENESS: Agar. Cocce. Natr.  
mur. Phosph.

MUSCLES, twitching of: Carbo  
veg.

OPISTHOTONOS: Ang. Bell. Can-  
thar. Cham. *Cicut. Ign.* Nux vom.  
Op. *Rhus. Stann. Stram.*

PAIN, sore: Kali. Plat. Staph.

—as if bruised: Agar. Alumina. Amm.  
mur. *Arn. Ars. China. Dros. Lach.*  
Merc. Natr. mur. *N. vom.* *Rhus.*  
*Ruta. Stann. Stram. Veratr.*

—simple: Agar. Alum. Arsen. Asa f.  
Aur. Bov. Calc. carb. Cann. Carbo  
animalis. Hyosc. *Kreos. Lyc. Hep.*  
Lach. Natr. mur. *Nitric ac. N. vom.*  
Op. Petr. *Sep. Sil. Sulph. Veratr.*

PRESSURE: Aconit. Agar. Arn.  
Bell. Calc. carb. Carbo veg. t. Caust.  
Cocce. Dule. Graphit. *Kali. Lyc.*  
Mur. ac. Natrum mur. Nux vom.  
Pulsat. *Rhus. Sep. Stannum. Staph.*  
Veratr. Zinc.

AS IF GONE TO SLEEP: Mer-  
cur. Phosph.

RIGIDITY: Ang. Petr.

SHUDDERING: Ang. Bell. Canth.  
Chel. Cocce. *Daph. Colchie. Graph.*  
Lach. Led. Natr. mur. *Nux vom.*  
Puls. *Rhus. Sabad. Staph. Sulph.*  
Thnj.

SPASM: Agar. Bell. Iod. *Lyc.*

SPOTS: *Sep.* Carbo veg.

STIFFNESS: Agar. Alum. *Carb*  
veg. Caust. *Kali. Led. Nux vom.*  
Petr. *Pulsatilla. Sep. Sulph.*

STITCHES: Acon. *Ant. crud.* Ar-  
gent. Arn. Asa f. *Bry.* Calc. carb.  
Cann. Caps. Caust. *Chin. Colch.*  
Con. Cycl. Dros. *D.!* *Hep. Kali.*  
Lachesis. Lycop. Muriatic acid.  
Natr. Oleand. Platina. Plumb.  
Puls. *Rhus. Rhod. Sabin. Spig.*  
Sil. Stann. Thnj. Valer. Verb.

SWEAT: Chin. Ipec. Lyc. Nux vom.  
Phosph. Pulsat. Sepiæ. Stram.  
Sulph.

SWELLING: Baryt. Bell. Puls.  
Staph.

TEARING AND DRAWING: Aco-  
nit. Ars. Bell. Bry. Calc. carb.  
Canth. Caps. Carbo veg. Caustic.  
Cina. Cham. Cocce. Ferr. *Hep. Kali.*  
Lach. Led. *Lyc.* Mang. Mez. Natr.  
Natr. mur. *N. vom.* Op. Phosph.  
Puls. *Rhus. Sep. Sil. Stann. Stram.*  
Sulph.

TENSION: Amm. mur. Bell. *Con.*  
Hep. Mosch. Natr. Natrum mur.  
Sulph. Zinc.

TETANUS: Ang. *Cicut.* Nux vom.  
Op. Petr. Plumb.

TROBBING: Baryt. Lyc. Phos.  
Puls.

TREMBLING: Coff. Merc.

TUBERCLES: Ant. crud. Caust.

WARMTH, feeling of: Carbo veg.  
Coff. Laur.

WEAKNESS: Agar. Arn. Carb. veg.  
Lach. Lyc. *Nitric ac. N. vom.* Pe-  
trol. Phos. Plat. Sulph. Sec. corn.

3. *Small of the back.*

BORING: Acon.

BURNING: Acon. Mur. ac. Nux vom.  
Phosphor. *Rhus. Sepiæ. Thnj.*

CHILLINESS: Lach. *Lycop.* Puls.  
Sabin.

COLDNESS: Carbo veg. Spong.  
—feeling of: Hell.

CONTUSIVE PAIN: Arn. Ruta.

CRACKING: Sulph. Zinc.

CRAWLING: Alum. Menyanthes.  
Sassap.

CRAMPY FEELING: Bryon. Caust.  
Chin. Nux vom.

CUTTING: Aur. Bellad. Canthar.  
Natr. Natr. mur. Puls. Zinc.

ERUPTION: Calc. carb. Natrum.  
Sep. Thnj.

GNAWING: Amm. Canth. Phos.  
Sulph.

- GRIPING: Cham. Graph. Merc.  
 ITCHING: Carbo veget. Caust. Kali.  
 Merc. Natr. mur.  
 JERKS: Asar. Bry. Chin. Rhus.  
 LAMENESS: *Cocc. Dulc.* Lach.  
*Natr. mur. Nux vom.* Selen. Sil.  
 NUMB FEELING: Carbo veg. Plat.  
 Spong.  
 AS IF FLASHING THROUGH :  
*Natrum mur.*  
 PAIN, as if dislocated: *Agaric.* Arn.  
 Rhus. Sulph.  
 — — sore: Caust. *Natr.* Sulph. ac.  
 — — bruised: Aco. Alum. Amm. mur.  
 Arg. Arn. Aur. *Bryon.* Caust.  
 Cham. Cina. **Graph.** Ign. *Lach.*  
 Magn. mur. Nux mosch. Nux  
 vom. Platina. **Rhus.** Ruta. Stront.  
*Sulph. Thuj. Veratr.*  
 — simple: Aconit. Agar. *Amm. mur.*  
 Arn. Baryt. Bov. *Bry. Calc. carb.*  
 Carbo an. China. Kali. Ign. Ipec.  
 Led. Lycop. **N. vom.** Puls. Petr.  
 Rhod. *Rhus.* Ruta. Sabadilla.  
 Sepiae. Stront. **Sulph.** Zinc.  
 PRESSURE: Acon. Bryon. Carbo  
 veg. *Caust.* Graph. Kali. Lach.  
 Lye. Men. Mosch. Nitric acid.  
*Puls.* Rhus. Sep. *Spong.* Staphys.  
 Sulph. Veratr.  
 PULSATIONS: Caust. Natr. mur.
- SPASMODIC PAIN: Bellad. Cocc.  
 Sil. Sulph.  
 STIFFNESS: Acon. *Ambra. Amm.*  
*mur. Baryt.* Bell. *Bry.* Carbo veget.  
 Caustic. Kali. Lach. Lycop. *Pulsat.*  
**Rhus.** Sil. Sulph.  
 STITCHES: Acon. Ambra. Anac.  
 Arg. Arn. *Bell. Bry.* Canthar. Carbo  
 veg. Carbo an. Caust. Chin. *Cocc.*  
*Con.* Graph. Ign. Iod. **Lach.** *Lyc.*  
 Magn. carb. Merc. Natr. Natr. mur.  
 Nux vom. Phos. ac. *Puls.* Rhus.  
 Sab. Sep. Sil. Stront. Tart. *Thuj.*  
 TEARING AND DRAWING :  
 Alum. Ars. Baryt. Bry. Calc. carb.  
*Canth.* Carbo veg. **Caustic.** Cham.  
 Chin. Cocc. Hep. *Kali.* Kreos.  
 Lach. Lye. *Natrum mur. Nux vom.*  
 Phosph. ac. Rhus. Sab. Sep. Sil.  
 Spongia. *Stann.* Stram. Stront.  
 TENSION: Acon. *Barit.* Carbo veg.  
 Caustic. Nitric ac. Nux vom. Sil.  
 Thuj.  
 THROBBING: Graphit. Ign. Nux  
 vom. Natr. mur. Sep.  
 TWITCHING: Calc. carb. Caustic.  
 Chin. Con. Puls. Staph  
 WEAKNESS: Ars. Cocc. Lach. Merc.  
 Natrum mur. *Nux vom.* Phosph.  
 Sep.

## XXIV. STOOL AND ANUS.

### Constipation.

#### 1. Character of Stool.

- ACRID: Ars. Bry. Cham. Lach.  
 Merc. Puls. *Veratr.*  
 ASH-COLORED: Asar. Dig.  
 BILIOUS: *Arsen.* Chamom. Chin.  
 Dulc. Ipec. Merc. **Puls.** *Sulph.*  
*Veratr.*  
 BLACK: Ars. Calc. c. Camph. Chin.  
 Cupr. Hep. Merc. Op. Squill.  
 Stram. *Veratr.*

- BLOODY: Ant. crud. Arn. **Ars.**  
 Asar. Bry. *Canth.* Carb. veg. Chin.  
 Cupr. *Dulc.* Ipec. Lye. Merc. Nitr.  
 ac. N. mosch. **N. vom.** Phosph. *Puls.*  
 Rhus. Sep. Sil. Sulph. acid. Tart.  
 Veratr.  
 BLOOD, lined with: Alum. Ambr.  
 Con. Bry. Ipec. Merc. *Nux vom.*  
 Puls. *Rhus.* Thuj.  
 BROWN: *Arnica.* Bryon. Chin. Mer-

- cur. Rheum. *Sec. Squill. Sulph. Veratr*
- BRIGHT-COLORED:** Anac. Carbo veg. Caust.
- BURNING:** *Ars. Lach. Merc.*
- CADAVEROUS SMELL:** Bism. Carb. veg. Stram.
- CLAYEY:** Calc. Carb.
- CONSTIPATED:** Acon. *Amm. mur. Arn. Aur. Bar. Bell. Bry. Calc. carb. Cann. Canth. Carbo veg. Caustic. Cham. Chin. Cina. Coccul. Coloc. Con. Crot. Daph. Ferr. Graph. Hep. Kali bich. Lach. Laur. Lyc. Merc. Mosch. Natr. mur. Nux vom. Op. Plat. Plum. Puls. Rhodod. Rhus. Sabad. Seneg. Sep. Sil. Spong. Staph. Stram. Sulph. Thnj. Veratr. Zinc.*
- DIARRHŒIC:** Acon. *Amm. mur. Ant. crud. Ant. carb. Ars. Asa foet. Aur. Bell. Bism. Bry. Calc. carb. Calad. Caps. Carb. veg. Carb. an. Chamom. Chin. Coloc. Cicut. Coc. Coffea. Cupr. Dule. Ferr. Graph. Hep. Hell. Hyosc. Ign. Ipec. Lach. Lyc. Magn. carb. Merc. Natr. Natr. mur. Nitr. acid. N. mosch. N. vom. Op. Petr. Phosph. Phosph. ac. Puls. Ran. seel. Rheum. Rhodod. Rhus. Sabad. Sec. Sepiæ. Spigel. Spong. Squill. Stann. Staph. Stram. Sulph. Tartar. Valer. Veratr. Zinc.*
- DIARRHŒEA, from cold:** Bell. *Bry. Cham. Dule. Merc. Nux vom. Puls. Rhus. Sulph.*
- after drinking beer: Ferrum. Rhus.
- after eating: *Arsen. China. Coloc. Lach.*
- after getting heated: *Bryon. Coff. Nux vom.*
- after a fright: Aco. *Op. Verat.*
- after a fit of joy: *Coff. Op.*
- with vomiting: Antim. tart. *Ars. Asar. Cupr. Ipec. Nux vom. Phos. Rheum. Veratr.*
- after eating fruit: *Ars. Chin. Puls.*
- after eating milk: *Bry. Lyc. Sulph.*
- after a cold drink: *Ars. Bry. Carb. veg. Puls.*
- after drinking: *Arsen. Caps. N. vom.*
- of children: *Cham. Ipecac. Merc. Rheum. Sulph.*
- chronic: *Arsen. Calc. Canth. Chin. Graph. Ipec. Nitr. ac. Phosph. Rhus. Sulph.*
- nocturnal: *Ars. Bry. Cham. Chin. Dule. Kali. Merc. Phosphor. Puls. Rhus. Sulph. Veratr.*
- dysenteric: *Ars. Caps. Carb. veg. Coloc. Chamom. Colchie. Merc. N. vom. Op. Pulsat. Rhus. Sulph. Veratr.*
- frothy: *Calcar. carb. China. Rhus. Sulph.*
- painless: *Arsen. Carbo veg. Chamom. Chin. Ferr. Hyosc. Lyc. Merc. Op. Phosph. Sec. Sulph. Stram.*
- watery: *Ant. crud. Ant. tart. Ars. Calc. Carb. Caps. Cham. China. Cupr. Ferr. Helleb. Hyosc. Ipec. Natr. mur. Nux vom. Petr. Phosph. Ph. ac. Puls. Rhus. Sec. cor. Sulph. Tart. Veratr.*
- spirting: *Ars. Merc. N. vom.*
- DIFFICULT:** *Amm. mur. Anac. Ant. Arn. Aur. Bar. Bry. Canth. Carb. v. Chin. Coc. Graph. Hep. Ign. Kali. Lyc. Magn. mur. Natr. mur. Nux mosch. Nux vom. Oleand. Petrol. Phosph. Plat. Pulsat. Rhodod. Ruta. Sassap. Silic. Staph. Sulph. Thnj.*
- FERMENTED:** *Ipec.*
- FETID:** *Ars. Bry. Calc. Carbo veg. Chin. Lach. Merc. Nitr. acid. Puls. Sil. Sulph.*
- WITH FLOCKS:** *Ipec. Veratr.*
- HAVING A FOUL SMELL:** *Ars. Bry. Carb. v. Cham. Chin. Nitr. ac. N. vom. Sec. cor. Sulph.*

- FREQUENT**, too: *Anac. Arn. Ars.*  
*Bellad. Calc. carb. Caps. Cham.*  
*Chin. Coec. Coff. Coloc. Dulc.*  
*Ferr. Graph. Ignat. Natr. mur.*  
*Nitr. ac. N. vom. Phosph. Ph. ac.*  
*Petr. Puls. Ran. seel. Rhus. Silic.*  
*Thuj. Valer.*
- GRAYISH**: *Asar. Digit. Mercure.*  
*Phosph. ac. Rheum.*
- GREENISH**: *Arsen. Aur. Bellad.*  
*Cham. Cupr. Dulc. Ipec. Merc.*  
*Phosph. Phos. ac. Puls. Stann.*  
*Sulph. Veratr.*
- HARD**: *Agar. Amm. Amm. mur.*  
*Ant. crud. Asa foet. Aur. Bar.*  
*Bell. Bry. Calc. carb. Cann. Carb.*  
*veg. Caustic. Cham. Cina. Coccul.*  
*Con. Daph. Graph. Hyosc. Guaj.*  
*Hep. Ign. Kali. Laur. Led. Lycop.*  
*Magn. mur. Merc. Natr. mur.*  
*N. vom. Op. Petr. Phosph. Phosph.*  
*acid. Plumb. Puls. Rheum. Rhodod.*  
*Rhus. Ruta. Sabad. Sec.*  
*corn. Selen. Sep. Sil. Spong. Stann.*  
*Staph. Sulph. Sulph. acid. Thuj.*  
*Veratr. Verb.*
- HARD AND LOOSE ALTERNATELY**: *Ant. crud. Ars. Iod. N. vom.*
- INSUFFICIENT**: *Anac. Alum.*  
*Arn. Ars. Calc. Chin. Daph. Hep.*  
*Kali. Lach. Lyc. Mur. magn. Natr.*  
*N. vom. Sep. Sil. Sulph.*
- INVOLUNTARY**: *Acon. Arn. Bell.*  
*Calc. Chin. Hyosc. Lach. Nat. mur.*  
*N. vom. Op. Phosph. ac. Rhus. Sec.*  
*corn. Sulph. Veratr.*
- at urinating: *Mur. ac.*
- during sleep: *Arn. Puls. Rhus.*
- LEAD-COLORED**: *Plumb.*
- LOOSE**: *Ant. crud. Canth. Chin.*  
*Ign. Merc. N. mosch. Rheum. Sep.*  
*Sulph.*
- LUMPY**: *Agar. Bar. Bell. Graphit.*  
*Lach. Magn. mur. Nux vom. Op.*  
*Plumb. Sil. Sulph. Sulph. ac. Thuj.*
- PAPESCENT**: *Agar. Antim. crud.*
- Arn. Asa f. Bell. Chin. Daph.*  
*Dros. Euphorb. Lach. Mezer. Nitr.*  
*Phosph. ac. Puls. Rheum. Rhod.*  
*Selen. Sil. Sulph. Tart.*
- PITCH**, like: *Hep. Lach. Merc.*  
*Sassap.*
- PURULENT**: *Arn. Canthar. Iod.*  
*Lach. Merc. Sulph.*
- SHEEP-DUNG**, like: *Brom. Magn.*  
*mur. Plumb.*
- SLIMY**: *Agar. Amm. m. Ant. cr.*  
*Arn. Ars. Asar. Bell. Bor. Canth.*  
*Caps. Cham. Carb. veg. Coloc.*  
*Chin. Coleh. Dule. Graph. Hell.*  
*Hyosc. Kali. Ipec. Merc. Mur.*  
*magn. Natr. mur. N. vom. Phosph.*  
*Ph. ac. Puls. Rhus. Ruta. Sec.*  
*Spig. Stann. Staph. Sulph. Tart.*  
*Veratr.*
- SMARTING**: *Merc. Puls.*
- SMELLING SOUR**: *Calc. carb.*  
*Chamom. Dule. Hep.*
- SOFT**: *Acon. Amm. mur. Antim.*  
*crud. Bryon. Calc. Carb. an. Carb.*  
*veg. Chin. Coec. Coff. Con. Dros.*  
*Dule. Graph. Guaj. Kali. Mur. ac.*  
*Natr. mur. Nitr. Nitr. ac. Phosph.*  
*Ph. ac. Puls. Rhodod. Sep. Sulph.*  
*Veratr. Viol. tric. Zinc.*
- STIRRED EGGS**, like: *Chamom.*  
*Chin. Merc. N. mosch. Pulsat.*  
*Rhus. Sulph. Viol. tric.*
- TENACIOUS**: *Ars. Caust. Hell.*  
*Kali. Laches. Mercur. Plumb. Zinc.*
- UNDIGESTED**: *Antim. crud. Arn.*  
*Arsen. Bryon. Cham. Chin. Ferr.*  
*Lach. Merc. Nitr. ac. Oleand.*  
*Phosph. Ph. ac. Sulph. Veratr.*
- WITH TÆNIA**: *Calc. Carb. veg.*  
*Filix m. Graph. Magn. mur. Merc.*  
*N. vom. Petrol. Sabad. Sab. Stann.*  
*Sulph. Valer.*
- WITH ASCARIDES**: *Aconit. Asar.*  
*Calcar. Cham. Chin. Cina. Ferr.*  
*Ignat. Merc. N. vom. Squill. Spong.*  
*Sulph. Teucr.*



WITH LUMBRICI: *Aconit. Anac.*  
*Bell. Calc. carb. Cham. Cicut. Cina.*  
*Graph. Lycop. Merc. Natr. mur.*  
*Nux vom. Ruta. Sabad. Sec. corn.*  
*Spigel. Sulph. Val.*

WHITISH: *Acon. Ars. Caustic.*  
*Cham. Chin. Colch. Digital. Iod.*  
*Merc. Nux vom. Plumb. Phosph.*  
*Pulsat. Rhus. Sec. Spong. Sulph.*  
*Veratr.*

YELLOWISH: *Ars. Asa fœt. Calc.*  
*carb. Chamom. China. Coloc. Cocc.*  
*Dulcam. Merc. Petr. Phosph. Puls.*  
*Rhus. Veratrum.*

2. Accompanying Ailments.

a. BEFORE STOOL.

BACK-ACHE: *Veratr.*

COLIC: *Agar. Amm. mur. Ant.*  
*tart. Ars. Asar. Bry. Canth. Chin.*  
*Croc. Dig. Kali. Ignat. Laur. Merc.*  
*Nitr. Nux vom. Petr. Puls. Rhenm.*  
*Rhus. Stann. Staph. Sulph. Verat.*

CHILLINESS: *Mercur. Nux vom.*  
*Veratr.*

DREAD OF MEN: *Ambr.*

FLATULENCE, distress from:  
*Agar. Amm. mur. Arn. Calc.*  
*phosph. Dule. Ferr. Phosph. Ph.*  
*ac. Puls. Spig. Stront.*

HEAT: *Merc. Phosph.*

NAUSEA: *Acon. Rhus. Veratr.*

PAINS IN THE ANUS: *Carbo*  
*anim. Colchic. Kali. Lach. Oleand.*  
*Phosph. Plat.*

RECTUM, pain in: *Nux vomica.*  
*Puls. Rhus.*

SMALL OF BACK, pain in: *Dule.*  
*Sulph.*

PROSTATIC JUICE, discharge of:  
*Selen. Sulph. Ph. ac.*

RUSH OF BLOOD TO THE  
 HEAD: *Opium.*

SCREAMING OF CHILDREN:  
*Cham. Rheum. Rhus.*

SWEAT: *Acon. Bell.*

URGING TO STOOL: *Cocc. Con.*

*Lach. Merc. Rhus. Sil. Staphys.*  
*Tinuj.*

VOMITING: *Ant. tart. Veratr.*

b. DURING STOOL.

BACK-ACHE: *Puls.*

CHILLINESS: *Veratr.*

COLIC: *Agar. Amm. mur. Anac.*  
*Ant. crud. Arn. Ars. Asa fœt. Bry.*  
*Calad. Canth. Carbo an. Cham.*  
*Cupr. Dule. Drosera. Ferr. Graph.*  
*Hep. Ignat. Ipec. Kali. Merc. Natr.*  
*mur. Nitric ac. Nux vom. Phosphor.*  
*Plumb. Puls. Rheum. Rhus. Sep.*  
*Spig. Sulph. Sulph. ac. Veratr.*

DROWSINESS: *Nux mosch.*

FAINTING: *Petr. Sassap. Spig.*

FLATULENCE, discharge of: *Calc.*  
*carb. Calc. phosph. Cocc. Sab.*  
*Staph.*

—distress from: *Amm. muriat. Arn.*  
*Hyosc. Nux vomica. Sab. Spong.*

HEAT: *Rhus. Sulph.*

LABOR-LIKE PAIN: *Op.*

NAUSEA: *Ant. tart. Ars. Asar.*  
*Cupr. Hell. Merc. Nitric acid.*  
*Prun. Sulph. Veratr.*

PALPITATION OF HEART: *Ant.*  
*tart. Nitric acid.*

PROSTATIC JUICE, discharge of:  
*Ign. Phosph. ac. Sil.*

RECTUM, pain in: *Asar. Calcar.*  
*Merc. Magn. mur. N. vom. Puls.*  
*Sab. Sulph. Veratr.*

—falling of: *Ars. Asar. Calcar. Daph.*  
*Ignatia. Merc. Nux vom. Puls. Ruta.*  
*Sepia. Sulph.*

RUMBLING IN BOWELS: *Ar-*  
*senic. Calc. carb. Lycop. Olean-*  
*der. Phosph. Phosph. acid. Sulph.*  
*acid.*

RUSH OF BLOOD TO THE  
 HEAD: *Rhus.*

SHUDDERING: *Bell. Nitric acid.*  
*Rheum. Veratr.*

SWEAT: *Bell. Mercur. Stramon.*  
*Veratr.*

- TENESMUS: Acon. *Ars.* Colch.  
 Laur. *Merc.* *Nux vom.* *Op.* *Rhus.*  
 Selen. *Sulph.* *Veratr.*
- THIRST: *Ars.* *Cham.* *Chin.*
- VARICES, protrusion of: *August.*  
 Kali. *Merc.* *Nux vom.*
- VERTIGO: *Cham.* *Veratr.*
- VOMITING: *Arg.* *Ant. tart.* *Ars.*  
*Cupr.* Kali *bichr.* *Ipec.* *Rheum.*  
*Sulph.* *Veratr.*
- WEAKNESS, feeling of: *Veratr.*
- c. AFTER STOOL.
- ANXIETY: *Caust.*
- AS IF BRUISED: *Calc.*
- CHILLINESS: *Canth.* *Mezer.* *Puls.*
- CHILL: *Daph.* *Mez.* *Plat.*
- COLIC: *Agar.* *Amm.* *mur.* *Anac.*  
*Carbo veget.* *Con.* *Dros.* *Dulc.* *Iod.*  
 Kali *bichr.* *Lyc.* *Nux vom.* *Natr.*  
*mur.* *Op.* *Phos.* *Pulsat.* *Rheum.*  
*Stann.* *Sulph.* *Veratr.*
- CONGESTION OF THE HEAD:  
*Lach.*
- DROWSINESS: *Nux mosch.*
- ERUCTATIONS: *Baryt.* *Merc.*
- FLATULENCE, discharge of: *Agar.*  
*Calc.* *Carbo veget.* *Hep.* *Lyc.* *Nux vom.* *Phosph.* *Puls.* *Sulphur.* *Thuj.*
- HEAD-ACHE: *Ambr.* *Sab.* *Sil.*
- LANGUOR: *Arn.* *Ars.* *Bry.* *Calc.*  
*carb.* *Chin.* *Colic.* *Cuprum.* *Daph.*  
*Ferr.* *Hyosc.* *Ipec.* *Lach.* *Lyc.*  
*Phosph.* *Puls.* *Sec. corn.* *Veratr.*
- MUCUS, discharge of: *Asarum.*  
*Merc.* *Phosph.* *Stann.*
- NAUSEA: *Acon.* *Caust.* *Veratr.*
- SMALL OF BACK, pain in: *Puls.*
- PALPITATION OF THE HEART:  
*Caustie.* *Con.*
- RECTUM, pressure in: *Hellebor.*  
*Ignat.*  
 —pain in: *Cham.* *Nux vom.*  
 —constriction of: *Nux vom.*  
 —prolapsus of: *Merc.*
- SWEAT: *Acon.* *Caust.*
- TENESMUS: *Capsic.* *Ipec.* *Merc.*  
*Nitr.* *Phosph.* *Rheum.* *Rhus.* *Sulph.*  
*Staph.*
- THIRST: *Caps.*
- VERTIGO: *Carbo an.* *Zinc.*
- VOMITING: *Veratr.*
3. *Anus, with rectum and perineum.*
- a. ANUS AND RECTUM.
- BLEEDING BETWEEN STOOL:  
*Alum.* *Ant. crud.* *Caps.* *Carbo veg.*  
*Merc.* *Phosph.* *Puls.* *Sabin.* *Sep.*  
*Stram.* *Sulph.*
- BORING IN THE RECTUM: *Valer.*
- BURNING IN THE ANUS: *Ammon.* *mur.* *Ant. tart.* *Ars.* *Baryt.*  
*Boy.* *Bry.* *Caps.* *Carbo anim.* *Carbo veget.* *China.* *Cocc.* *Coloc.* *Graph.*  
*Iod.* *Ipec.* *Kali.* *Laur.* *Merc.* *Mur.*  
*ac.* *Natr.* *Natr. mur.* *Nitric ac.* *N.*  
*vom.* *Oleand.* *Phosph.* *Puls.* *Sepiæ.*  
*Stront.* *Sulph.* *Thuj.* *Verat.*
- in the rectum: *Alumina.* *Aur.* *Ars.*  
*Calc.* *Carbo an.* *China.* *Con.* *Euphorb.* *Lyc.* *Mur. ac.* *Magn.* *mur.*  
*Natr. mur.* *Nitric ac.* *Petr.* *Phosph.*  
*Puls.* *Sep.* *Stront.* *Sulph.* *Veratr.*
- CONTRACTION: *Camph.* *Conium.*  
*Natr. mur.* *Nux vom.* *Op.*
- in anus: *Alum.* *Ang.* *Carbo an.*  
*Cocc.* *Graph.* *Ign.* *Nitric ac.* *Nux vom.* *Plumb.* *Sec.* *Sep.* *Sulph.*
- in rectum: *Amm.* *Bell.* *Calc.* *Chin.*  
*Coloc.* *Ferr.* *Ign.* *Nux vom.* *Phosph.*  
*Sep.* *Thuj.*
- CREEPING: *Calc.* *Colchic.* *Croc.*  
*Kali.* *Natr.* *Nux vom.* *Plat.* *Rhus.*  
*Sabad.* *Sep.* *Zinc.*
- CUTTING IN ANUS: *Arsen.* *Chin.*  
*Caust.* *Kali.* *Laur.* *Lyc.* *Natr.* *Nux vom.* *Phosph.* *Staphys.* *Sulph.*
- in rectum: *Canth.* *Caust.* *Chin.*  
*Lyc.* *Mang.* *Nux vom.* *Phosph.*  
*Sep.* *Sulph.*
- DRAWING IN: *Thumb.*
- EXCORIATION: *Cham.* *Graph.*

—in anus : Alum. Amm. Arsen.  
*Graph. Hep. Merc. Nux vom.*  
*Phosph. Puls. Sassap. Veratr.*

—in rectum : Camph. Natrum mur.  
 Phosph. Ph. ac. Puls.

FIG WARTS: *Nitric acid. Sabina.*  
*Thuja.*

FISTULA RECTI : *Calc. Caust.*  
*Petr. Sil. Sulph.*

GNAWING : Ang. *Merc. Phosph.*

HEAT : Canth. Con.

HERPES : Natr. mur.

ITCHING IN ANUS: *Acon. Alum.*  
*Ambr. Ant. crud. Baryt. Bell. Bry.*  
*Calc. Carbo veg. Caust. China.*  
*Cina. Croc. Euph. Ign. Kali. Lye.*  
*Merc. Nitric ac. Nux vom. Op.*  
*Phosphor. Platin. Rhus. Sabad.*  
*Sassap. Sep. Sil. Stann. Staph.*  
*Sulph. Tenc. Thuja. Zinc.*

—in rectum : Aco. Ambr. Asar. Bell.  
 Cie. *Chin. Chin. Euphorb. Ferr. Ign.*  
*Nitric ac. Nux vom. Ruta. Sabad.*  
*Sep. Sil. Spigel. Stann. Sulph.*  
*Tenc. Valer.*

MUCUS, discharge of, between stool :  
*Antim. Caps. China. Colchic. Hell.*  
*Graph. Merc. Phosph. Puls. Rhus.*  
*Sep. Spig. Sulph. Tart.*

PAIN, simple : Aconit. Canthar. Carbo  
 an. Caust. Lye. *Merc. Natr.*  
*mur. Nux vom. Phosph. Seneg.*

—in rectum : *Acon. Ambr. Camphor.*  
*Merc. Magn. mur. Sep.*

PINCHING : *Merc. Natrum mur.*  
*Sabad.*

PRESSURE IN ANUS: *Acon.*  
*Baryt. Calc. Cyclam. Laur. Nitric*  
*ac. Nux vom. Petr. Phosphor. Puls.*  
*Seneg. Staph.*

—in rectum : Arn. Bell. China. Kali.  
 Lye. *Nitric ac. Nux vom. Opium.*  
 Phosph. Sen. Stann.

RECTUM, prolapsus of : Antim.  
 crud. Ars. Asar. Bry. Colch. *Dulc.*  
*Ign. Lach. Merc. Natrum muriat.*  
*Nux vom. Ruta. Sep. Sulph.*

REMAINING OPEN, always : *Phos.*  
 SORENESS: *Ars. Carbo an. Cau-*  
*stic. Hep. Graph. Merc. Nitric ac.*  
*Phosph. Sep. Sulph.*

—pain as of : Amm. *Ars. Caust.*  
*Graph. Hep. Ign. Mur acid. Natr.*  
*mur. Nux vom. Phosph. Puls. Sep.*  
*Spungia. Sulphur. Veratr.*

SPASM, (in anus): *Colch. Lach.*  
 Kali bichr.

—in rectum : Calc. Caust. Chin. *Colch.*  
*Lach. Lye.*

SPHINCTER ANI, lameness of :  
 Bell. Cole. Hyosc.

STITCHES IN ANUS: *Acon. Ars.*  
 Bry. Canth. Carbo an. Carbo veg.  
 Chin. Con. *Croc. Graph. Ign. Ipec.*  
*Kali. Lye. Natrum. Natr. mur. N.*  
*vom. Phos. Phosph. ac. Plat. Ran.*  
*bulb. Sab. Sep. Sil. Sulph.*

—in rectum : Alum. *Ant. tart. Bell.*  
 Bov. Carbo an. Caustic. *Chin.*  
*Graph. Ign. Lye. Magn. mur. Natr.*  
*mur. Nux vom. Phosph. Puls. Ru-*  
*ta. Sep. Sil. Sulph. Valer.*

SWELLING : Camph. Graph. Hep.  
 Ign. Nux vom.

TEARING IN THE ANUS : Colchic.  
 Daph. Kali. Nux vom. Phos. ac.  
 Sep. Thuja.

—in rectum : Carbo veg. China. Lye.  
 Kali. *Nux vom. Phosph. ac. Ruta.*  
*Sabad.*

TENESMUS: *Acon. Arn. Arsen.*  
 Bellad. Bov. *Calc. Canthar. Caps.*  
 Coleh. Daph. Euphorbium. Hep.  
*Ipec. Kali. Laur. Merc. Natr. Ni-*  
*tric ac. Nux vom. Phosph. Plat.*  
*Rheum. Rhus. Ruta. Sep. Staph.*  
*Sulphur. Veratr. Zinc.*

TROBBING : Grat. Lach. Natr.  
 mur.

TORPOR : Alum. Carb. veg. *Chin.*  
 Ign. Kali. Lycop. Natr. mur. *Nux*  
*vom. Op. Ruta. Sep. Staph. Thuja.*  
*Veratr.*

ULCERS : Caust. Sassap.

**URGING TO STOOL:** Alum. *Anac.*  
*Arn.* *Ars.* *Asa f.* *Bar.* *Bellad.* *Calc.*  
*Camph.* *Canth.* *Carb. v.* *Caustic.*  
*Coccul.* *Colch.* *Coloc.* *Con.* *Ferr.*  
*Graphit.* *Hepar.* *Hyosc.* *Ign.* *Kali.*  
*Lach.* *Lyc.* *Merc.* *Magn.* *mur.* *Natrum.*  
*Natr. mur.* *Nitr. ac.* *N. mosch.*  
*N. vom.* *Petr.* *Phos.* *Puls.* *Rheum.*  
*Rhodod.* *Rhus.* *Ruta.* *Sabad.* *Sep.*  
*Sil.* *Stann.* *Staph.* *Sulphur.* *Veratr.*  
*Verb.*

—with emission of flatulence: *Carb. an.* *Lach.*

—with falling of rectum: *Ruta.* *Mur. ac.*

—at night: *Merc.* *Puls.* *Sulph.*

—with erections: *Thuj.*

—painful: *Ars.* *Caust.* *Sulph.*

—ineffectual: *Acon.* *Anac.* *Arn.* *Asa f.* *BeH.* *Calc.* *Carb.* *Caps.* *Carb. veg.*  
*Caust.* *Coccul.* *Colch.* *Con.* *Graph.*  
*Hell.* *Ign.* *Lach.* *Lyc.* *Kali bich.*  
*Merc.* *Magn.* *mur.* *Natr.* *Natr. mur.*  
*Nitr. ac.* *Nux vom.* *Phosph.* *Plumb.*  
*Pulsat.* *Rheum.* *Rhus.* *Ruta.* *Sabad.*  
*Sassap.* *Sep.* *Sil.* *Spig.* *Stann.*  
*Staph.* *Stram.* *Sulph.* *Thuj.* *Veratr.*

**VARICES:** *Ambra.* *Anmon.* *mur.*  
*Anac.* *Antim. crud.* *Ant. tart.* *Ars.*  
*Bar.* *Bell.* *Brom.* *Calc.* *Caps.* *Carb.*  
*an.* *Carb. veg.* *Caust.* *Coloc.* *Ferr.*  
*Graph.* *Hell.* *Ignat.* *Kali.* *Lach.*  
*Lyc.* *Magn.* *Merc.* *Mur. ac.* *Natr.*  
*mur.* *Nitr. ac.* *Nux vom.* *Phosph.*  
*Ph. ac.* *Plumb.* *Puls.* *Rhus.* *Sabin.*  
*Sep.* *Sil.* *Stram.* *Sulph.* *Sulph. ac.*  
*Thuj.*

—protruding: *Calc.* *Caustic.* *Ferr.*  
*Graph.* *Merc.* *Puls.* *Sep.* *Sulph.*  
*Thuj.*

—with colic: *Carb. veg.* *Nux vom.*  
*Sulph.*

—blue: *Carb. veg.* *Mur. ac.*

—blind: *Ars.* *Cham.* *Ign.* *Nux vom.*  
*Puls.* *Sulph.* *Veratr.*

—bleeding: *Aconit.* *Amm.* *Antim.*  
*crud.* *Bell.* *Calc.* *Caps.* *Carb. veg.*  
*Chin.* *Cupr.* *Ferr.* *Ipec.* *Ign.* *Merc.*  
*Nux vom.* *Phosph.* *Puls.* *Sab.* *Sep.*  
*Stram.* *Sulph.*

—burning: *Ant. crud.* *Arsen.* *Calc.*  
*carb.* *Caps.* *Carb. an.* *Graph.* *Nitr.*  
*ac.* *Sulph. ac.*

—inflamed: *Acon.* *Arsen.* *Nux vom.*  
*Sulph.*

—swollen: *Alum.* *Calcar.* *carb.* *Carb.*  
*veg.* *Graph.* *Nux vom.* *Puls.*

—ulcerated: *Nux vom.* *Puls.* *Sulph.*

—itching: *Acon.* *Graph.* *Phosph.*  
*Sulph.* *Sulph. ac.*

—humid: *Sulph.*

—excoriated: *Cham.*

—stinging: *Ars.* *Baryt.* *Caust.* *Puls.*

—suppressed flow of: *Carb. veg.* *N. vom.* *Sulph.*

—as if sore: *Merc.* *Mur. ac.* *Phosph.*  
*Puls.* *Stann.*

#### b. PERINEUM.

**BURNING:** *Ant. crud.* *Rhodod.*

**CONTRACTION:** *Sep.* *Sulph.*

**CUTTING:** *Lyc.* *N. vom.*

**HERPES:** *Petr.*

**INFLAMMATION:** *Plumb.*

**ITCHING:** *Agn.* *Ars.* *Carb. veg.* *N. vom.* *Petr.* *Seneg.* *Tarax.*

**PAIN, simple:** *Caust.* *Lyc.* *Phos.*

**SORENESS:** *Carb. v.* *Merc.* *Rhod.*

**STITCHES:** *Alum.* *Merc.* *Nat.* *Sep.*

**TEARING:** *Daph.*

## XXV. URINE AND URINARY ORGANS.

### URINE.

#### 1. Quality Thereof.

**ACRID:** *Ant. tart.* *Arn.* *Borax.* *Calcar.* *Cann.* *Canth.* *Caust.* *Clem.*

*Creos.* *Graph.* *Hep.* *Iod.* *Kali.* *Merc.*  
*Natr. mur.* *Rhus.* *Sassap.* *Seneg.*  
*Thuj.* *Verat.*



**AMMONIACAL:** Asa f. Carbo veg.  
Creos. Iod. Mosch. Nitr. acid. Petr.  
Phosph.

**BILIOUS:** Valer.

**BLOODY:** Acon. Ambr. Ant. tart.  
Arn. Ars. Calc. carb. Cann. Canth.  
Capsic. Carbo veg. Chin. Coloc.  
Con. Hep. Ipec. Lye. Merc. Mezer.  
Nitr. acid. Nur rom. Op. Phosph.  
Ph. ac. Puls. Sec. corn. Sep. Squil-  
la. Sulph. Zinc.

**BROWN:** Acon. Ambr. Arn. Ars.  
Asa f. Bell. Bry. Calc. Caust. Colch.  
Dig. Merc. Nitr. ac. Petr. Phosph.  
Rhodod. Puls. Sep. Sulph. Tart.  
Valer.

**BURNING:** Acon. Arsen. Camph.  
Cann. Canthar. Caps. Creos. Digit.  
Hep. Merc. Phosph. Staph. Veratr.

**BLACKISH:** Colch.

**CAT'S URINE**, smelling like: Viol.  
tart.

—like garlic: Phosph.

—sour. Ambr. Calcar. Graph. Merc.  
Natr.

—pungent: Asa f. Bor. Merc.

—like sulphur: Phosph.

—foul: Carbo veg. Dule. Merc. Nitr.  
ac. Phosph. ac. Puls. Rhod. Sulph.  
Viol. tric.

—like violets: N. mosch. Tereb.

**CLEAR:** Amm. muriat. Euphr. Hy-  
osc. Laches. Nitr. Squill. Stramm.

**COLD:** Agar. Nitric acid.

**COLORLESS** (see pale): Puls.

**COPIOUS:** Acon. Alum. Ambra.  
Amm. mur. Arg. Arn. Ars. Aur.  
Baryt. Bell. Bism. Bryo. Canth.  
Carbo veg. Carbo an. Chin. Cicut.  
Clem. Coloc. Creos. Cycl. Daph.  
Digital. Euph. Guaj. Hyosc. Ign.  
Iod. Laur. Led. Lycopod. M. arct.  
Merc. Mur. ac. Natrum. Nitric.  
Oleand. Petr. Phosph. Phosph. ac.  
Pulsat. Rhus. Sab. Sassap. Selen.  
Senega. Spig. Squilla. Staph. Sulph.  
Tar. Thuja. Valer. Verat. Verb. Vi-  
ola tric. Vit.

**LIKE CURD:** Ambr. Cina.

**DARK:** Aco. Ant. tart. Arn. Asa f.  
Bell. Bry. Carbo veg. Chin. Colch.  
Dig. Hell. Hep. Iod. Ipec. Lach.  
Lycop. M. arct. Merc. Nitric acid.  
Op. Phosph. Rhus. Selen. Sep.  
Staph. Sulphur. Tart. Veratr.

**DIMINISHED:** Aco. Agar. Ambr.  
Ammon. mur. Ant. tart. Arn. Ars.  
Aur. Bell. Bry. Calcareacarb. Cann.  
Canth. Carbo veg. Caust. Cham.  
Chin. Coccul. Coff. Colch. Con. Cupr.  
Daph. Dig. Dule. Graph. Grat. Hell.  
Hep. Hyosc. Iod. Ipecac. Kali.  
Laur. Led. Lye. Merc. Mur. acid.  
Nitric ac. Nux mosch. Nur vomica.  
Op. Petr. Phosph. Phosphoric ac.  
Plumbum. Puls. Ruta. Sabad. Sas-  
sap. Sec. corn. Selen. Seneg. Squil-  
la. Stannum. Staph. Stram. Stront.  
Sulph. Veratr. Zinc.

**FIBRES**, full of: Cann.

**FIERY:** Acon. Bry. Cann. Colch.  
Plumb.

**LIKE FLOUR:** Calc. Graph. Mep.  
Natrium mur.

**FROTHY:** Lach. Laur. Lycopod.  
Seneg.

**GREENISH:** Ars. Camph. Iodine.  
Kali. Rhod. Ruta. Veratr.

**HOT:** Acon. Ars. Bry. Canthar.  
Cham. Colchic. Dulcam. Hep. Lach.  
Nitric ac.

**INODOROUS:** Ambr. Dros.

**LIGHT-YELLOW:** Ambra. China.  
Sec. corn.

**LITTLE AT A TIME:** Aconit.  
Agar. Bell. Cann. Canth. Caust.  
Colchic. Dig. Euphorb. Hell.  
Hyosc. Iod. Kali. Laur. Led. Merc.  
Nitric ac. Nur rom. Op. Petr.  
Phosph. Puls. Rhus. Ruta. Sil.  
Staph. Sulph. Tart. Veratr.

**LOAM-COLORED:** Anac. Canthar.  
Ign. Sabad. Sassap. Sep. Sulphur.  
Zinc.

- MILKY:** Aur. *Carbo veg.* Dulc. Iod. *Phosph. ac.*
- OPALESCENT:** Iodine. Phosphor. Puls.
- PALE:** Agar. *Alum.* Arn. Aur. Bell. Bism. Canth. Chel. Chin. Cocc. *Colchic.* *Coloc.* Con. Creos. Dig. Hep. Ignat. Iod. Lach. Laur. Mur. acid, Nitr. N. jugl. Nux vom. Ol. an. Par. Phosph. **Phos. ac.** *Pulsat.* Rhod. *Rhus.* Sassap. *Secale corn.* *Staph.* *Stram.* Strontia. Sulph. Sulph. ac. Zinc.
- PURULENT:** Cann. *Canth.* Clem. *Lyc.* *Nux vom.* *Sabin.* Sep.
- RED:** Aco. Ant. crud. *Antim. tart.* Arn. Bell. Bry. Calc. Camph. Cann. *Canth.* Carb. veg. Chin. *Colch.* *Coloc.* Con. Dig. Hep. *Ipec.* Kali bichr. Merc. Nux vom. Op. Phos. Plumbum. *Puls.* *Sassap.* Sep. *Sil.* Squilla. *Staph.* Sulph.
- SEDIMENTOUS:** Aconit. Alum. Ambr. Ant. crud. Arn. *Arsen.* Aur. Baryt. Bry. Calc. carb. Camph. Cann. Canth. Carbo an. Carbo veg. *Caust.* Cham. Chin. Chinin. Cicut. *Colchic.* *Coloc.* Con. Creos. *Dulcam.* Graph. Hep. Hyoseyam. Iod. *Ipec.* Kali. Lach. Laur. Lol. tem. *Lyc.* Mang. *Mercur.* Mezer. Natr. mur. Nitr. *Nitric ac.* Nuxmosch. Oleand. Ol. an. Opium. Petr. *Phosph.* **Phosph. ac.** Puls. *Rhus.* Ruta. *Sassap.* Selen. *Seneg.* *Sepia.* *Sil.* Spong. *Squilla.* Sulph. Sulph. ac. Tar. *Thu.* Valer. Zinc.
- SEDIMENT,** blueish: Prun.
- bloody: Aconit. Calcar. carb. Cann. Canth. Caps. *Coloc.* Dulc. *Lyc.* Merc. Phosphor. **Phosph. ac.** Puls. Sep. Sulph. Sulph. ac. Zinc.
- brown: Ambr. Lach. Valer.
- thick: Camph. Laur. *Mercur.* *Secale corn.* Spong. Sulphur. Valer.
- dark: Iod.
- purulent: Canthar. Clem. Con. *Lyc.* Puls. Sep.
- fibrous: Cann. Canth. Cham. *Merc.* Mezer. *Sassap.* Seneg. Tart. Zinc.
- flocculent: Cannab. Cham. *Merc.* Nitr. Nitric ac. Seneg. Tart.
- gelatinous: Puls.
- yellow: Ammon. mur. Bry. Cham. Chin. Cupr. *Lyc.* *Phos.* *Sil.* Spong. Sulph. Sulph. ac. Zinc.
- of yellow sand: Sil.
- gray: Ant. tart. Con. Spong.
- gravelly: Ambra. Ant. crud. Calc. carb. Canth. Chin. Lach. **Lyc.** Natr. mur. Nitric acid. Nux mosch. Nux vom. Op. *Phosph.* Puls. Ruta. *Sassap.* Sep. *Sil.* Thu. Valer. Zinc.
- clayey—Amm. m. Anac. Kali. *Sassap.* Sep. Sulph. Sulph. ac. Zinc.
- floury: Ant. tart. Calc. Graph. Merc. Hyos. Natr. mur. Phosph. ac. Tart.
- reddish: Acon. Ambr. Amm. mur. Ant. crud. Arn. Ballad. Canth. Chin. Coloc. Con. Creos. Dulc. Graph. Iod. *Ipec.* Kali. Lach. **Lyc.** Mang. Mez. Natr. mur. Nitr. ac. Op. Petr. Phosph. Puls. Sec. corn. Selen. Sep. Sil. Squill. Thu. Valer.
- like blood: Amm.
- like red sand: Natr. mur. Nitr. ac. Sil.
- slimy: Ant. crud. Ars. Aur. Bry. Calc. carb. Carb. veg. Caust. Chin. Cina. Coloc. Con. Dulc. Hep. *Ipec.* Merc. Natr. Natr. mur. Nitr. acid. N. vom. Phosph. Phosph. ac. Puls. Rheum. *Sassap.* Seneg. Sulphur. Valer.
- turbid: Alum. Con. *Rhus.* Zinc. violet: Puls.
- whitish: Amm. Baryt. Bell. Calcar. Canth. Caps. *Colch.* *Coloc.* Con. Dulc. Graph. Hep. Ignat. Nitr. ac. Oleand. Petr. *Phosph.* Phosph. ac. Prun. Puls. Rhodod. *Rhus.* Sep. Spig. Spong. Sulph. Valer. Zinc.

- whitish-turbid: *Con.* *Rhus.*
- cloudy: *Alum.* *Ambr.* *Bryon.*  
*Caust.* *Kali.* *Laur.* *Mere.* *Nitr.*  
*Petr.* *Phosph. ac.* *Plat.* *Seneg.*  
*Thu.* *Valer.*
- brick-dust: *Acon.* *Arn.* *Chin.* *Ipec.*  
*Puls.*

**TENACIOUS:** *Canth.* *Cupr.* *Creos.*  
*Dulc.* *Phosph. ac.*

**THICK:** *Camph.* *Con.* *Dulc.* *Iod.*  
*Nux vom.* **Plumb.** *Sabad.* *Seneg.*  
*Sulph. ac.*

**TURBID:** *Ambr.* *Anac.* *Ant. tart.*  
*Ars.* *Aur.* *Bell.* *Cann.* *Canth.* *Car-*  
*bo an.* **China.** *Chlorof.* *Cina.* *Clem.*  
*Colch.* *Coloc.* *Con.* *Cycl.* *Dig.* *Dulc.*  
*Hep.* *Ignat.* *Iod.* *Kali.* *Lach.* *Lyc.*  
**Mere.** *Mosch.* *Mur. ac.* *Nitr. acid.*  
*Phosph.* *Plumb.* *Pulsat.* *Rhus.*  
**Sabad.** *Sassap.* *Sep.* *Sulph.* *Sulph.*  
*ac.* *Valer.* *Veratr.* *Zinc.*

—becoming: *Ambr.* *Ang.* *Arn.* *Aur.*  
**Bry.** *Caust.* **Cham.** *Cina.* *Con.* *Dig.*  
*Graph.* *Hep.* *Iod.* *Laur.* *Mercur.*  
*Mezer.* *Nitr.* *Petr.* **Phosph. ac.**  
*Rhus.* *Sassap.* *Seneg.* *Sepia.*  
*Sulph.* *Thu.* *Valer.*

**WHITISH:** *Ang.* *Arn.* *Aur.* *Cann.*  
*Carb. veg.* **Cina.** *Con.* *Iod.* *Mere.*  
*Phosph. Ph. ac.* *Rhus.* *Sassap.*  
*Sulph.*

**WHITISH-YELLOW:** *Amm.* *Phos.*

**WHITISH-GREEN:** *Camph.*

**WHITISH-TURBID:** *Cann.* *China.*  
*Con.*

**YELLOW:** *Ant. crud.* *Arn.* *Ars.*  
*Bell.* *Bry.* *Canth.* *Cham.* *Chin.*  
*Daph.* *Hyosc.* *Iodine.* *Ipec.* *Lach.*  
*Led.* *Magn. m.* *Nitr.* *Petr.* *Rheum.*  
*Samb.* *Sassap.* *Veratr.* *Zinc.*

## 2. Urine After Stool.

**BURNING URINE:** *Cann.* *Canthar.*  
*Caps.* *N. mosch.* *Puls.* *Staph.*  
*Veratr.*

**DIABETES:** *Acon.* *Argent.* *Bell.*

*Cann.* *Cupr.* *Clem.* *Dig.* *Hyosc.*  
*Led.* *Nitr. ac.* *Pulsat.* *Rhus.* *Squill.*  
*Stram.* *Tar.* **Veratr.**

—with emaciation: *Mere.*

—with head-ache: *Veratr.*

—with back-ache: *Phosph. ac.*

—with sweat: *Acon.* *Bell.*

**MICTURITION,** nocturnal: *Agaric.*

*Ambr.* *Amm. mur.* *Anac.* *Arn.* *Ars.*

*Bry.* *Bov.* *Calc.* *Canth.* *Con.* *Graph.*

*Iod.* *Kali.* *Lach.* *Lyc.* *Natr.* **Natr.**

**m.** *Nitr. ac.* *Puls.* *Rhus.* *Ruta.*

*Sep.* *Sil.* *Stront.* *Sulph.* *Thu.* *Zinc.*

—too frequent: *Acon.* *Anac.* *Ant.*

*crud.* **Arg.** *Arn.* *Ars.* *Aur.* **Bar.**

*Bell.* *Bry.* *Calc.* *carb.* *Calc.* *phosph.*

*Camph.* *Can.* *Caps.* **Caust.** *Chel.*

*Chin.* *Coff.* *Con.* **Creos.** *Cyclam.*

*Daph.* *Euphorb.* *Graph.* *Hell.*

*Hyosc.* *Ign.* *Iod.* *Kali.* *Laches.*

*Led.* *Lyc.* *M. austr.* **Mere.** *Mur. ac.*

*Natr.* *Natr. mur.* **Nitr.** *N. vom.*

*Oleand.* *Petr.* *Phosph.* **Phosph. ac.**

*Plumb.* *Rhus.* *Sassap.* *Selen.* *Sil.*

*Spig.* *Spong.* **Squill.** **Staph.** *Sulph.*

*Tar.* *Thu.* *Valer.* *Veratr.* *Verb.*

—difficult: *Acon.* *Agar.* *Bellad.*

*Camph.* *Cann.* *Canth.* *Cic.* *Dig.*

*Euphorb.* *Hyosc.* *Hep.* *Nux mosch.*

*Op.* *Phosph.* *Plumb.* *Sec. corn.*

*Thu.*

—too seldom: *Acon.* *Agar.* *Ammon.*

*mur.* *Apis.* *Arn.* *Arsen.* *Aur.* *Bell.*

*Bry.* *Camph.* **Canthar.** *Carb. veg.*

*Chin.* *Cic.* *Colch.* *Cupr.* *Dig.* *Graph.*

*Hep.* *Hyosc.* *Iod.* *Laur.* *Led.* *M.*

*austr.* *Mane.* **Mere.** *Nitr. ac.* *N. vom.*

*Op.* *Phos.* **Plumb.** *Puls.* *Ruta.* *Sec.*

*corn.* *Squill.* *Staph.* *Stram.* *Sulph.*

*ac.* *Verat.*

—drop by drop: *Agar.* *Arn.* *Bell.*

*Camph.* *Cann.* **Canth.** *Caps.* **Caust.**

*Chin.* *Clem.* *Colehic.* *Con.* *Dig.*

*Dros.* **Dulc.** *Euphorb.* *Graph.* **M.**

*austr.* *Mere.* *N. mosch.* *Nur vom.*

*Petr.* *Phosph. ac.* *Puls.* *Rhus.* *Ruta.*

*Sil.* *Staph.* *Stram.* **Sulph.** *Thu.*

- interrupted: Agar. Carb. an. Caust.  
*Clem. Con. Dulc. Led. M. austr.*  
Op. Phosph. acid. Puls. Sulph.  
Thuj. Zinc.
- involuntary: Acon. *Ant. tart. Arn.*  
Ars. Bell. Bry. Calc. Canthar.  
Carb. veg. **Caust.** Chin. Cic. Cina.  
*Creos. Dig. Dulc. Ferr. Hep.*  
*Hyosc. Iod. Lach. Laur. Led. Lyc.*  
*M. austr. Merc. Natr. mur. Nitr.*  
ac. Nux vom. Petr. Phosph. ac.  
**Puls. Rhus. Ruta. Sep. Sil. Spig.**  
Squill. Stram. *Sulph. Veratr.*
- when coughing: Bry. *Caust.*  
Natr. mur. Veratr.
- at night, in bed: Acon. *Ars. Bell.*  
Bry. Carb. v. **Caust.** *Cham. Cina.*  
Con. *M. austr. Natr. Op. Puls.*  
*Rhus. Ruta. Sep. Sil. Stram.*  
*Sulph.*
- in the first sleep: *Sep.*
- in the day-time: Ferr.

ISCHURIA: Aconit. Agar. **Arn.** Aur.  
Bellad. *Camph. Cann. Canthar.*  
Chin. Cic. Coloc. Con. *Dig. Eu-*  
phorb. Graphit. Hep. **Hyosc. Laur.**  
**Lycop.** Nitric ac. *Nux vom. Op.*  
Plumbum. **Pulsat.** Ruta. Sabina.  
**Stram. Sulph. Veratr. Zinc.**

STREAM, double: Canth.

- thin: Camph. *Canth. China. Led.*  
Mercur. *Puls. Spongia. Staph.*
- scattering: *Cann. Canth.*
- slow: Camph. Merc. Plat.
- strong: Agn. Cic. Vit.

TENESMUS OF BLADDER: Aco-  
nit. Arn. Camphor. *Cann. Canth.*  
Caps. *Colch. Merc. Nux vom. Puls.*  
*Sabin. Sassap. Squilla. Sil. Viol.*  
tric.

URGING TO URINATE: *Acon.*  
Agar. Alum. Ambra. Ammon. mur.  
*Ant. tart. Arg. Arn. Ars. Bar. Bell.*  
Bor. Bovist. **Bry.** Calc. carb. Cann.  
**Canth.** Caspic. Carbo an. **Caust.**  
Chamom. Cicut. Cocc. Colchic.  
*Coloc. Con. Copaiv. Creos. Dig.*

*Dulc. Euphorbium. Graph. Guaj.*  
*Hell. Hyosc. Ignat. Iod. Ipec. Kali.*  
*bichr. Lach. Lycop. M. anstr.*  
Mur. magn. Men. *Merc. Mur. ac.*  
Natr. Nitric. ac. N. jugl. N. vom.  
Petr. *Phosph. Phos. ac. Plumb.*  
**Puls. Rhod. Rhus. Ruta. Sabadilla.**  
**Sabina. Sambuc. Sassap. Selen.**  
Sep. Sil. *Spig. Squill. Stann.*  
**Staph. Sulphur. Tar. Tart. Thuj.**  
Veratr. Zinc.

- with scanty discharge: Acon. Anac.  
*Ant. crud. Antim. tart. Bell. Bry.*  
Calc. carb. **Cann. Canth.** Caps. Carb.  
veg. Caust. Cocc. *Colch. Cuprum.*  
Con. **Digit. Dros. Euphorb. Hell.**  
**Hyosc. Iod. Led. M. austr. Men.**  
Merc. Natr. Nitric ac. Nux mosch.  
Nux vom. Petr. Phosph. Phosph.  
acid. Plumb. Puls. *Ruta. Sabad.*  
Samb. Sassap. *Staph. Sulph. Ve-*  
*ratr.*

- with copious discharge: Agar. Alum.  
*Ant. tart. Arg. Ars. Bellad. Bism.*  
*Carbo an. Cin. Calc. Cycl. Creos.*  
Lach. Mur. ac. *Natr. mur. Rhus.*  
*Spig. Squilla. Stann. Sulph. Tar.*  
*Verb. Viol. tric.*

- irresistible: *Baryt. Bell. Bry. Calc.*  
*Chin. Ign. Merc. Nitr. ac. Phosph.*  
**Phosph. acid. Pulsat. Rhus. Ruta.**  
*Squilla.*

- ineffectual: *Aco. Arnica. Camph.*  
**Canth.** Caps. Caust. Cham. Chin.  
**Dig. Hell. Hyosc. Merc. Mur. acid.**  
*Nux vom. Petr. Ph. ac. Plumb.*  
**Pulsat. Sabina. Sassap. Sec. corn.**  
Sep. Squill. Sulph.

### 3. Accompanying Ail- ments.

a. Before urination.

BURNING IN THE URETHRA:  
Arn. Cann. Natr. Nux vom. Puls.  
Zinc.



## CUTTING IN THE URETHRA:

Canth.

—in the abdomen: Puls.

## DRAWING IN RENAL REGION:

Clem.

—in penis: Cic.

GENERALLY: *Arn. Bor. Bryon.*

Bellad. Canth. Chin. Cic. Coloc.

Creos. Digit. Dule. Hep. **Nux vom.***Phosph. ac.* Plumb. Puls. Rhod.*Rhus. Sulphur.* Tar.PAIN IN THE BLADDER: *Nux vom.*SORE PAIN IN URETHRA: *Cop.**Nux vom. Phosph.*

## STINGING IN THE BLADDER:

Canth.

TEARING IN THE GLANS: *Chin.**b. During urination.*BURNING IN BLADDER: *Aconit.**Camph. Lach. Staph.*—in urethra: *Ambra. Ars. Bar. Calc.**Cann. Canth. Caust. Cham. Clem.**Chin. Colch. Dule. Ferr. Hep. Ipec.**Kali bichr. Merc. Nitric ac. Nux**vom. Phosph. ac. Puls. Sabad. Sas-**sap. Sep. Staph. Sulphur. Thuj.**Veratr.*GENERALLY: *Acon. Anac. Apis.**Ars. Bell. Bor. Bry. Calcar. Camph.**Cann. Canthar. Caps. Carbo veg.**Caust. Chin. Clem. Colch. Con.**Cupr. Dig. Dulcam. Graph. Hell.**Hep. Ipec. Kali. Lye. Mur. magn.**Merc. Mezer. Mur. ac. Natr. mur.**Nitric ac. Nux vom. Petr. Phosph.**Phosph. ac. Puls. Rhod. Rhus.**Sassap. Sec. corn. Seneg. Sep.**Spigel. Staph. Stram. Sulph. Thuj.**Veratr. Zinc.*GNAWING IN URETHRA: *Caust.*HEAT IN URETHRA: *Caust.*ITCHING IN URETHRA: *Alum.**Ambra. Arn. Canth. Daph. Lye.**Natr. mur. Nux vom. Thuj.*

## LANCINATIONS IN URETHRA:

*Ant. crud. Calc. Canth. Con. Dig.**Graph. Merc. Phos. ac. Puls. Zinc*—in bladder: *Canth. Lye. Thuj.*—in renal region: *Canth. Merc.*OS COCCYX, pain in: *Graph.*PRESSURE IN BLADDER: *Acon.**Con. Nitric ac. Spig. Staphys.**Veratr. Zinc.*—in the urethra: *Canth. Puls.*—in renal region: *Bell. Lye.*

## PROSTATIC JUICE, discharge of:

*Natr. Phosph. ac.*STITCHES IN BLADDER: *Canth.**Lye. Sulph.*—in urethra: *Bry. Can. Canth. Chin.**Clem. Con. Cupr. Daph. Graph.**Ign. Lach. Merc. Natr. mur. Sulph.**Thuj.*—in kidneys: *Aco. Bell. Canth. Hep.**Phosph. ac.*—in bowels: *Nitric ac.*STOOL INVOLUNTARY: *Muriat.**ac. Squill.**c. After urination.*BURNING IN URETHRA: *Con.**Graphit. Lye. Merc. Nitric acid.**Rhod. Sulph.*CUTTING IN URETHRA: *Canth.**Con. Staph. Sulph.*DRIBBLING OF URINE: *Bryon.**Calc. carb. Lach. Petr. Selen. Thuj.*DRIBBLING OF BLOOD: *Daph.**Zinc.*GENERALLY: *Anac. Antim. tart.**Arn. Asa f. Aur. Bell. Calad. Calc.**Cann. Canth. Capsic. Chin. Clem.**Coloc. Con. Creos. Dig. Hep. Kali.**Lach. Lye. M. aret. Mercur. Mur.**ac. Natr. Natr. pur. Nitr. ac. Nux**vom. Par. Phos. Plat. Puls. Rhod.**Ruta. Selen. Seneg. Sep. Stam.**Staph. Sulph. Thuj. Veratr. Zinc.*ITCHING IN URETHRA: *Canth.**Lye. Sassap.*MUCUS, discharge of: *Con. Natr.**mur.*NAUSEA: *Dig.*

PRESSURE IN URETHRA: Stann.  
 —on the bladder: Con. Stann. Zinc.  
 SORENESS IN URETHRA: Nux  
 vom. Thuj.  
 STITCHES IN URETHRA: Arn.  
 Caps. *Merc.* Muriat. acid. Phosph.  
 Veratr.  
 —in bladder: Guaj.

—in kidneys: Ambr.  
 TEARING IN URETHRA: Carbo  
 veg. Lye.  
 URETHRA, as of a drop in: Lact.  
 Thuj.  
 URGING TO URINATE: Bar. Dig.  
 Mercur. Ruta. Stann. Staph. Zinc.

## URINARY ORGANS.

### 1. Bladder.

BURNING: Acon. Ars. *Canth.* Lach.  
 N. vom. Phosph. ac. Puls. Staph.  
 CATARRH: Ant. *Dulc.* Nux vom.  
 Puls. Sulph.  
 CONSTICTION: Caps. Cic. Phos.  
 ac. Puls. Sassap.  
 CUTTING: *Canth.* Kali. Lye. Nux  
 vom. Puls. Thuj.  
 DRAWING: Calad. Rhod.  
 FULLNESS, feeling of: Caladium.  
 Ruta.  
 GENERALLY: Acon. Alum. Ambr.  
*Ant. crud.* Arn. Ars. Aurum. Bell.  
 Bry. Calc. Camph. Cann. **Canth.**  
 Caps. Carbo veget. Chin. Cic. Coff.  
 Clem. Colch. Dig. *Dulc.* Graph.  
 Hyosc. Ign. Kali. **Lycop.** *M. austr.*  
*Merc.* Mezer. Natr. mur. Nitr. ac.  
 N. vom. Phosph. Phos. ac. Puls.  
 Rhus. Ruta. Sabin. Sassap. Sep.  
*Staph.* Sulph. Thuj. Zinc.  
 HÆMORRHOIDS: Aconit. Borax.  
 Carbo veg. Dulcam. *Nux vom.*  
 Puls. Sulph.  
 INFLAMMATION: Aconit. Camph.  
**Canth.** Dig. Merc. N. vom. Puls.  
 Squilla. Sulph.  
 —of neck of bladder: Aconitum.  
**Canth.** Con. Dig. Nux vom. Puls.  
 Sulph.  
 INSENSIBLE: M. austr. Stann.

PARALYSIS: Ars. Bell. *Canth.* Cic.  
*Dulc.* Hyosc. Laur. *M. austr.*  
 PRESSING: Alum. Carbo veget.  
 Chin. Colch. *Nux vom.*  
 PULSATION: *Canth.*  
 PRESSING: Hyosc.  
 PRESSURE: Asar. Bellad. Bryon.  
 Camph. Carbo veg. Con. Ign. Lach.  
 Natr. mur. *Nitric acid.* Pulsat. Sas-  
 sap. Sep. Squilla. Staph. Zinc.  
 RELAXED: Mur. ac.  
 SPASMS: Asa f. Camph. *Canth.*  
 Caps. Phosph. ac. Sep.  
 SPASMODIC PAIN: Prun.  
 STITCHING: Aur. *Canth.* Cham.  
 Guaj. Lye. Puls. Rhus.  
 STONE: Amb. Ant. crud. Calc. carb.  
 Cann. **Lye.** Nux vom. Phosph.  
 Ruta. Sassap. Sil.  
 SUPPURATION: *Canth.* Puls.  
 SWELLING OF NECK OF  
 BLADDER: Puls.  
 THICKENING: *Dulc.*

### 2. Urethra.

BURNING: Arsen. Baryt. Bryon.  
 Calc. carb. Cann. *Canth.* Caust.  
 Clem. Colch. Cupr. Ipec. Kali  
 bichr. Lye. Mercur. Natr. Nitric  
 ac. Petr. Phosph. Phosph. acid.  
 Sassap. Sepiæ. Staph. Sulph. Thuj.

**CUTTING:** *Ant. crud.* Calc. Carb.  
Cann. *Canth.* Carbo veg. Colchic.  
Con. Cupr. *Dig.* Ignat. *Lyc.* Merc.  
Nux vom. *Phosph. ac.* Rhod. Sep.  
*Sulph.* Thuj.

**DISCHARGE:** Agn. Calc. carbon.  
Cann. Canthar. *Caps.* Dulc. Hep.  
Merc. Nitr. ac. Nux vom. Petr.  
*Puls.* Sassap. *Sulphur.* Thuj.

—bloody: Calc. carbon. *Lycop.* Merc.  
Nitric ac. Zinc.

—thick: Merc.

—purulent: *Cann.* Canthar. Clem.  
Mercur. Nitric acid. *Sassap.* Sulph.  
Thuj.

—yellowish: *Cann.* Mercur. Natr.  
mur. Nitric ac. Thuj.

—greenish: Merc. Nitric ac.

—slimy: *Ant.* *Cann.* *Caps.* Dulc.  
Merc. Mezer. Nitric ac. *Phos. ac.*  
*Puls.* Sulph.

—watery: *Cann.* Merc. *Sulph.*

**DRAWING:** Colc. Kali. *Lyc.* Puls.  
Sabad. Sulph. Zinc.

**GENERALLY:** Acon. Alum. Ant.  
crud. Antim. tart. *Arn.* Arg. nitr.  
Aur. Bov. Bryon. *Calc. carb.* *Cann.*  
Canth. Capsicum. *Caust.* Chel.  
China. Clem. Coff. Colch. Con.  
Cop. Cupr. Dulc. Ferr. Graph.  
Hep. Ign. Kali. Lach. *Lycop.* M.  
austr. Merc. Mezer. *Natrum mur.*  
Nitric ac. Nux vomica. **Phosph.**  
*Phosph. ac.* Puls. Rhus. Sabin.  
Sep. Staph. *Sulphur.* Thuj. Ve-  
ratr. Zinc.

**INFLAMMATION:** Acon. Bovista.  
Cann. *Canth.* Clem. Digital. Hyosc.  
Merc. Nux vom. Puls. Squilla.  
Sulph.

**ITCHING:** Agar. Arn. Bov. Bry.  
Canth. Chin. *Lyc.* Merc. Natrum  
mur. Nux vom. *Sulph.* Thuj.

**PRESSURE:** Canth. Colch. Nux  
vom. Puls.

**PULSATING:** *Canth.* Merc.

**SORENESS,** as from: Bar. *Daph.*  
Natr. mur. Phosphor. Tener. Zinc.

**SPASM:** Chin. Carbo an.

**STITCHING:** Arn. Bryon. *Cann.*  
*Canth.* Capsic. Con. Cuprum.  
Daph. Graph. Ign. Iod. *Lach.*  
*Lyc.* Merc. Mur. ac. Natrum mur.  
Nux vom. Phosphor. ac. Squilla.  
*Sulph.* Thuj.

**STRICTURE:** Camph. Canth. Carbo  
veg. Clem. Dulc. *Lyc.* N. vom.  
Petr. Puls. Rhus. Sulph.

**SWELLING:** Canthar. Merc. Nitr.  
Rhus.

**TEARING:** Cann. Carbo vegetab.  
Clem. Colch. *Lycop.* Natrum. Sas-  
sap. Sulph.

**TICKLING:** Canth.

**TWITCHING:** Con. Natr. *Phosph.*

**ULCER:** Merc. Nitric ac.

### 3. Kidneys.

**BURNING:** Bell.

**DRAWING:** Clem.

**GENERALLY:** Acon. Alum. Bell.  
*Cann.* Canth. Carbo veget. Clem.  
Colchic. Hep. Kali. *Lyc.* Nitric ac.  
*Nux vomica.* Phosph. Phosph. ac.  
*Pulsat.* Rheum. Ran. seel. *Sassap.*  
Sep. Sulph. Thuj. Zinc.

**GRAVEL:** Alum. *Calcar.* carbon.  
Cann. Canth. *Lyc.* Nitric ac. *Nux*  
vom. Petr. Phosph. Ruta. *Sil.* Sas-  
sap. Sulph.

**INFLAMMATION:** Bell. *Cann.*  
*Canthar.* Hep. *Lyc.* N. vom. Puls.

**JERKING:** Canth.

**PULSATIONS:** Canth.

**PRESSURE:** Thuj. Zinc.

**AS IF SORE:** Zinc.

**SPASMODIC PAINS:** Sulph.

**STITCHES:** Acon. Bell. *Canthar.*  
Hep. Kali. Phosph. ac. Zinc.

## XXVI. SEXUAL ORGANS AND FUNCTIONS.

## MALE ORGANS and THEIR FUNCTIONS.

## 1. Penis.

BLUENESS: Arn.  
 BURNING: *Canth.* Euphorbium.  
     Merc. Mur. ac. Plumb.  
 COLDNESS: *Lyc. Merc.* Sulph.  
 DEADNESS: *Lyc. Merc.*  
 DRAWING: *Canth. Cie. Iod. Kali.*  
     M. austr. Merc. Ran. se. Zinc.  
 ERUPTION: Graph. Phosph. acid.  
 GANGRENE: Ars. *Canth.*  
 GENERALLY: Alum. Ambr. Anac.  
     Ant. crud. *Arn. Ars. Bovista. Bry.*  
     *Calc. carb. Camphor. Cann. Canth.*  
     *Caps. Carbo veg. Caust. Chin.*  
     *Clem. Colch. Con. Cupr. Dig. Ferr.*  
     *Graph. Hep. Ign. Iodine. Ipec.*  
     Kali. Lach. *Lyc. M. austr. Merc.*  
     Mezer. Mur. ac. Natr. *Natrum*  
     *mur. Nux vom. Op. Phosphor.*  
     Phosph. ac. *Plat. Plumbum. Puls.*  
     Ran. Rhus. Sabin. Selen. *Sep. Sil.*  
     Spigel. Staph. **Sulph. Thuj.** Viol.  
     tric. Zinc.  
 GONORRHOEA: *Cann. Cantharis.*  
     *Caps. Clem. Dule. Ferr. Lyc. Merc.*  
     Natr. mur. *Nitric ac. Nux vom.*  
     Puls. Sabina. Sec. corn. (?) Selen.  
     *Sulph. Thuj.*  
 —acute: *Cann. Canth. Merc. Nitr. ac.*  
 —chronic: *Cann. Capsic. Dule. Ferr.*  
     *Merc. Nitr. ac. N. vom. Sep. Sulph.*  
 —green: *Cann. Merc.*  
 —white: *Cann. Caps. Ferr.*  
 —clear: Merc. Sulph.  
 —yellow: *Cann. Merc. Nitric ac.*  
     Sulph.  
 INFLAMMATION: *Canthar. Merc.*  
     Plumb. *Sulph.*  
 ITCHING: Ars. Con. Spig. *Sulph.*  
 PAIN AS IF BRUISED: Arn.  
 PRESSURE: Viol. tric.  
 PUSTULES: Bovist.

REDNESS: Arn. Cann.  
 RELAXED: Calc. *Lyc. Merc. Prun.*  
 SORE, painful as if: Arn. Cann.  
     Cicut.  
 SPASM: N. mosch.  
 STITCHES: Asa foet. *Lyc. Merc.*  
     Puls. *Spig. Sulph. Thuj.*  
 SWELLING: *Arn. Cann. Canthar.*  
     *Merc. Plumb.*  
 TEARING: Con. Kali. M. austr.  
     Merc. Thuj.  
 TWITCHING: *Lyc.*  
 TENSION: Arn. Graph.  
 ULCER: Merc.

## 2. Glans.

BURNING: Ars. Cann. Chin. *Lyc.*  
     Merc. Stann. Tart.  
 COLDNESS: *Lyc. Merc.*  
 CREEPING: *Alum. Merc. Natr.*  
     mur. Tart.  
 CUTTING: *Lyc. Thuj.*  
 DAMPNES: Alum. *Lyc. Merc.*  
     Natr. mur. *Nitr. ac. N. vom. Sulph.*  
     *Thuj.*  
 DRAWING: Alum. Asa foet. Iod.  
     *Lyc.*  
 ERUPTION: Calad. *Lycop. Nitr.*  
     Petr. Sep.  
 FORMICATION: Alum.  
 GENERALLY: Alum. Antim. crud.  
     Ars. Calc. carb. *Cann. Canth. Carb.*  
     veg. Caust. *Chin. Colch. Dig.*  
     Graph. Ign. Iod. Lach. Kali. *Lyc.*  
     M. austr. *Merc. Mez. Natr. Natr.*  
     *mur. Nitr. ac. N. vom. Petr.*  
     Phosph. Puls. Rhus. Sabin. *Sep.*  
     Sil. Stann. Staph. **Sulph. Thuj.**  
 HARDNESS: *Cann.*  
 INFLAMMATION: *Arnic. Cannab.*  
     Cupr. *Merc. Rhus.*  
 ITCHING: Ambr. August. Ars.  
     Cann. Euphr. Hell. Iod. Mang.



**Merc. Natr. Nitr. ac. N. vom.**  
 Phosph. ac. Sep. Sil. Thuj.  
**PRESSURE:** Lyc. Viol. tric.  
**REDNESS:** Arsen. *Cann. Merc.*  
 Sabin.  
**SMEGMA:** Merc. Nitr. ac.  
**SORENESS,** as from: Nux vom.  
 Sabin.  
**SPOTS,** red: *Cann. Carbo veg. Lach.*  
 Nitr. ac.  
**SWELLING:** Ars. *Cann. Canth.*  
*Merc. Rhus.*  
 —on one side: Spig.  
**STITCHES:** Acon. Arn. Ars. Euphorb. Enphr. Lycop. *Merc.*  
 Phosph. Rhod. *Sabin. Sulph. Thuj.*  
**TEARING:** *Daph. Euphorb. Kali.*  
 Lyc. Merc.  
**TUBERCLES:** Hell.  
**ULCERS:** *Merc. Nitr. ac. Sep.*  
*Sulph. Thuj.*  
 —chancreous: *Merc. Nitr. ac. Rhns.*  
*Sulph. Thuj.*  
**ULCERATIVE PAIN:** Ambr. Ign.  
**VESICLES:** Merc. Phosph. acid.  
 Rhus.  
 —  
**3. Prepuce.**  
**BURNING:** Arsen. *Cann. Merc. N.*  
 vom.  
**CREEPING:** Croc. Merc. Ph. ac.  
**DRYNESS:** Calad. Ign. *Sil.*  
**ERUPTION:** Aur. Graph. *Merc.*  
*Nitr. ac. Rhus. Sulph.*  
**GENERALLY:** Acon. Arn. Arsen.  
 Calad. Calc. carb. *Cannab. Canth.*  
 Caust. Chin. Euphorb. Graph. Hep.  
*Ign. Lach. Lyc. M. aret. Merc.*  
 Mezer. Natr. mur. Nitr. ac. Nux  
 vom. **Phosph. ac.** Plumb. Puls.  
 Rhod. *Rhus. Selen. Sep. Sil.*  
 Staph. *Sulph. Thuj. Viol. tric.*  
 Zinc.  
**HARDNESS:** Lach. *Merc. Sulph.*  
**HERPES:** *Caust. Dulc. Hep. Merc.*  
 Nitr. ac. Phosph. ac. Sep.  
**INFLAMMATION:** Calc. carb.

*Cann. Merc. Nitr. ac. Sulph.*  
**ITCHING:** Aco. Agar. Bry. Calad.  
 Carb. veg. *Cann. Caust. Euphras.*  
*Merc. Nitr. ac. N. vom. Puls. Sep.*  
 Sil. *Sulph. Thuj.*  
**PAIN AS IF SORE:** Calad. Cham.  
 Ign. N. vom.  
**PARAPHIMOSIS:** Bell. Coloc. Ign.  
 M. aret. *Merc. N. vom.*  
**PHIMOSIS:** *Cannab. Canthar. Merc.*  
 Nitr. ac. Rhns. *Sulph. Thuj.*  
**REDNESS:** Calc. *Cann. Merc.*  
**SCURFS:** Caust. Nitr. ac. (Comp.  
 Herpes.)  
**STITCHES:** Ars. Bry. *Cann. Euphras. Hep. Merc. Puls.*  
**SMARTING:** *Calad. Merc. Nux*  
 vom. Puls.  
**SPOTS,** red: Nitr. ac. Rhns.  
**SORENESS:** *Calad. Cann. Carbo*  
 veg. Ign. Nitr. ac. N. vom.  
**STRICTURE:** *Cann. Merc. Sep.*  
*Sulph.*  
**SUPPURATION:** Merc.  
**SWELLING:** Calad. *Cann. Graph.*  
*Mercur. Nitric ac. Rhns. Sulph.*  
 Thuj.  
**ULCERS:** Anrum. Canstic. Hep.  
*Merc. Nitric ac. Rhns. Sep.*  
*Sulph. Thuj.*  
 —chancreous: *Kali. bichr. Mercur.*  
*Nitric ac. Rhns. Thuj.*  
**VESICLES:** Merc. Rhus.

#### 4. Testicles.

**BURNING:** Iod. Plat. Staph.  
**COLD FEELING:** Merc.  
**CONSTRICTION:** N. vom. Plumb.  
**DRAWING:** Amm. Clem. Ipecac.  
 M. aret. *Merc. Phos. Puls. Rhod.*  
 Staph. Zinc.  
**DWINDLING:** Aur. Lyc.  
**GENERALLY:** *Agn. Amm. Antim.*  
 crud. Arn. Aur. Bell. Calc. carb.  
 Canth. Carbo veg. Caustic. *Chin.*  
 Clem. Coec. Con. Dig. Graph.  
 Ignat. Iod. Kali. Lyc. M. austr.

*Merc.* Natrum. **Nitric** ac. Nux vom.  
 Phos. Phosph. ac. Plat. Plumbum.  
**Puls.** Rhod. Rhus. Selen. Sep. *Sil.*  
*Spong.* Staph. *Sulph.* Tar. *Thu.*  
 Zinc.  
 GNAWING: Plat.  
 HANGING DOWN: *Nitr.* ac. *Puls.*  
 HARDNESS: Agn. Arg. Arnica.  
 Aur. Clem. Iod. *Merc.* N. vom.  
 Rhod. Spong.  
 HEAT: Arn.  
 —feeling of: Sulph. ac.  
 HERNIA: Lach. N. vom. Rhus.  
 INDURATION: *Amm.* Ignatia. M.  
 austr. Plumb.  
 INFLAMMATION: *Aco.* Aur. Clem.  
 Lye. *Mercur.* Nux vom. *Puls.*  
 Staph. Zinc.  
 ITCHING: Iod. Ign. *Merc.* Nux  
 vom. Spig.  
 JERKS: M. austr.  
 PAIN AS IF BRUISED: Arn.  
 Clem. Con. Dig.  
 PRESSING TOWARD THE  
 TESTICLES: Iod.  
 PRESSURE: Aur. Bism. Cannab.  
 Caust. Ign. Lach. Phos. ac. *Puls.*  
 Squilla. Staph. Zinc.  
 SENSITIVENESS: Arn. *Asa foet.*  
 Cann. Phosph. ac. Zinc.  
 SPASM: Phosph.  
 STITCHES: Arn. Bell. *Merc.* Nux  
 vom. Rhod. Spig. *Thu.*  
 SWELLING: Arn. Arsen. Aur. Can-  
 thar. China. Clem. Con. Iod. Lye.  
 Merc. Nitric acid. Nux vom. *Puls.*  
 Rhod. Ruta. *Spong.* Staph. Zinc.  
 —of epididymis: Sulph.  
 TEARING: Chin. M. austr. Phos.  
 ac. *Puls.* Staph.  
 TENSION: Arn. Sulph.  
 TURNING: Sabad.

### 5. Scrotum.

BLUENESS: Arn.  
 BURNING: Euphorb. Rhod.  
 CONTRACTION: Petr. Puls.

COLDNESS: Caps.  
 CREEPING: Arn. Carbo veg. Selen.  
 Thu.  
 DAMPNESS: Petr. Rhus. Sulph.  
 ERUPTION: Petr. Phosphor. ac.  
 Rhus.  
 ERYSIPELAS: Ars.  
 GENERALLY: Acon. Ambr. Ant.  
 crud. Arn. Ars. Baryt. Bell. Calc.  
 carb. Camphor. Cannab. Carbo  
 veg. Caust. Chin. Clem. Con. Eu-  
 phorb. Graph. Hep. Ign. Iod. Kali.  
 Lye. M. austr. Mezer. *Natr.* Nitric  
 ac. Nux vom. Petr. Phosph. Phos.  
 ac. Plumbum. Puls. Rhodod. Rhus.  
 Selen. Sep. Sil. Staphys. Sulph.  
 Thu. Viol. tric. Zinc.  
 HERPES: Calc. carb. Dulc. Petr.  
 HYDROCELE: Arn. Graph. Nux  
 vom. Puls. Rhodod. Rhus. Sil.  
 INFLAMMATION: Ars. Phosph. ac.  
 Plumb.  
 ITCHING: Ambr. Amm. Aurum.  
 Baryt. China. Coec. Graphit. Lye.  
 Meph. Nux vom. Petr. Pulsat.  
 Rhodod. Rhus. Selen. Staph.  
 PAIN AS IF BRUISED: Acon.  
 Arn. Kali.  
 PULLING: Petr.  
 RASH: Rhus.  
 REDNESS: Puls.  
 RELAXED: Chin. Lye.  
 SHRIVELING: Rhod.  
 SORENESS: Arn. Petr. Plumb.  
 Sulph.  
 STITCHES: Arn. Merc. Sulphur.  
 Thu.  
 SWELLING: Arn. Canth. Carbo  
 veg. Graph. Plumbum. Puls. Rhus.  
 Sep.  
 SWEAT: Baryt. Ignat. Rhodod.  
 Thu.  
 TENSION: Arn.

### 6. Spermatic Chord.

BURNING: Staph.  
 DRAWING: Agn. Canthar. Clem.

*M. austr.* *Merc.* *N. vom.* *Puls.* Rhod.  
 GENERALLY: *Alum.* *Amm.* *mur.* *Ant. crudum.* *Arn.* *Canthar.* *Clem.* *Iod.* *Kali.* *M. austr.* *Mercur.* *Nitric ac.* *Nux vom.* *Phosph. acid.* *Plumb.* *Puls.* *Sabin.* *Spong.* *Staphys.* *Thuj.* *Veratr.*  
 HARDNESS: *Phosph. ac.*  
 PRESSURE: *Nux mosch.* *Spong.* *Sulph.* *Thuj.*  
 STITCHES: *Amm.* *mur.* *Arn.* *Grat.* *Staph.* *Thuj.*  
 SWELLING: *Cann.* *Phos.* *Puls.* *Spong.*  
 TEARING: *Colch.* *Puls.*  
 TENSION: *Cann.* *M. austr.*  
 THROBBING: *Amm.* *mur.*  
 TWITCHING: *Plumb.*

#### 7. Prostate Gland.

HARDNESS: *Iod.*  
 INFLAMMATION: *Agn.* *Iod.* *Merc.* *Puls.*  
 PROSTATIC JUICE, discharge of:  
*Alum.* *Anac.* *Calcar.* *Con.* *Hep.* *Lycop.* *Nitric acid.* *Petr.* *Phosph. ac.* *Plat.* *Selen.* *Sep.* *Sil.* *Staph.* *Sulph.* *Zinc.*  
 —when urinating: *Anac.* *Calc.* *Sep.* *Sulph.*  
 —at stool: *Alum.* *Calcar.* *Hep.* *Ign.* *Selen.* *Sil.* *Sulph.*  
 —after stool: *Selen.*  
 —before stool: *Selen.*  
 —with relaxed parts: *Calcareo.* *Phosph. ac.*  
 SWELLING: *Puls.*

#### 8. General Symptoms.

COLDNESS: *Agn.* *Capsic.* *Lycop.* *Merc.*  
 ERUPTION: *Aur.* *Calad.* *Caustic.* *Dulc.* *Graph.* *Merc.* *Nitric ac.* *Petr.* *Phosph. ac.* *Rhus.* *Sep.* *Sil.* *Sulph.* *Thuj.*

—on the hairy part of [the parts: *Kali. bichr.* *Lach.*  
 FETID SMELL: *Natr. mur.* *Sassap.*  
 FIGWARTS: *Euphr.* *Lyc.* *Nitric ac.* *Phosph. ac.* *Sabin.* *Sassap.* *Thuj.*  
 —bleeding: *Thuj.*  
 —flat: *Nitric ac.* *Thuj.*  
 —like cock's-crest: *Nitric acid.* *Thuj.*  
 —humid: *Nitric acid.* *Sulph.* *Thuj.*  
 —dry: *N. vom.* *Sulph.* *Thuj.*  
 GANGRENE: *Ars.* *Canth.*  
 HAIR, falling off: *Natrum mur.* *Nitric ac.* *Rhus.* *Selen.*  
 HERPES: *Aur.* *Dulc.* *Nitric acid.* *Petr.* *Phosph. ac.* *Sulph.*  
 RELAXED: *Calc.* *Lyc.* *Phos. ac.* *Selen.*  
 SWEAT: *Calad.* *Merc.* *Phos. ac.* *Sep.* *Sulph.* *Thuj.*  
 WEAKNESS: *Agn.* *Calc.* *Lycop.* *Mang.* *Sep.* *Sulph.*

#### 9. Sexual Instinct, Functions.

ERECTIONS: *Agar.* *Alum.* *Ambr.* *Anac.* *Arn.* *Ars.* *Aur.* *Baryt.* *Bell.* *Bov.* *Calc. carb.* *Cann.* *Canth.* *Caps.* *Carbo animal.* *Carbo veg.* *Chin.* *Clem.* *Colch.* *Con.* *Dig.* *Graph.* *Ignatia.* *Kali.* *Lach.* *Lycop.* *M. aret.* *Mur.* *magn.* *Merc.* *Mosch.* *Natr.* *Natr. mur.* *Nitric ac.* *Nux vom.* *Op.* *Phos.* *Phosph. ac.* *Plat.* *Plumbum.* *Puls.* *Rhus.* *Sabin.* *Sep.* *Sil.* *Spig.* *Staph.* *Sulph. acid.* *Tar.* *Thuj.* *Viol.* *tric.* *Zinc.*  
 —in the evening: *N. vom.* *Phos.* *Staph.*  
 —in the morning: *Ambr.* *Anac.* *Arn.* *Brom.* *Caps.* *Lach.* *Natrum.* *N. vom.* *Phos.* *Plumb.* *Puls.* *Rhus.* *Thuj.* *Vit.*  
 —at night: *Canth.* *Merc.* *Natr. mur.* *Nitric ac.* *Plumb.* *Puls.* *Staph.* *Sulph. ac.* *Zinc.*  
 —in the day-time: *Cann.* *Hyosc.* *Lach.* *Puls.*

- day and night: *Canth.*
- too short: *Calad. Calc. Con. Selen.*
- deficient: *Agn. Calad. Camphor. Con. Graph. Hell. Lach. Lyc. Magn. carb. Nux mosch. Puls. Tener. Vit.*
- too feeble: *Baryt. Caladium. Lachesis. Lyc. Mercur. Selen. Sulph.*
- too strong: *Canthar. Creos. Lach. Natr. mur. Nux vom. Op. Phos. Puls. Sabin. Zinc.*
- too painful: *Cann. Canth. Graph. Ign. Kali. Merc. Nitric ac. Nux vom. Plumb. Sabad. Sulph. Thuja.*
- without sexual lust: *Ambra. Calad. Cann. Caps. Graphit. Lach. Magn. Natrum muriat. Phosph. ac. Sabad. Sabin. Sil. Spig.*
- SEMEN BLOODY: *Caust. Canth. Led. Merc.*
- thin: *Selen.*
- inodorous: *Selen.*
- watery: *Led. Sulph.*
- flow of: *Agar. Alum. Anac. Arg. Arn. Ars. Aur. Baryt. Bell. Bism. Bov. Brom. Calad. Calc. Canth. Carbo an. Carbo veg. Caustic. China. Cicut. Con. Ferr. Graphites. Guaj. Kali. Lach. Led. Lyc. Magn. Merc. Natr. Natr. mur. Nitric ac. Nux mosch. Nux vom. Op. Petr. Phosph. Phosph. ac. Puls. Ran. bulb. Rhus. Ruta. Sangv. Selen. Sep. Silicea. Stann. Staph. Sulphur. Thuja. Verb. Vit. Zinc.*
- in the day-time: *Canthar. Carbo an. Caust. Graph. Lach.*
- not taking place during intercourse: *Calad. Graph. Kali. Lach. Lyc.*
- with relaxed penis: *Bellad. Con. Graph. Mosch. N. vom. M. aret. Plumb. Selen.*
- at stool: *Phosph. ac.*
- weakening: *Baryt. Carbo an. Chin. Kali. Lach. Lyc. Nux vom. Phosph. Phosph. ac.*
- too soon: *Bor. Calad. Calcar. Lyc. Phosph. Sel. Zinc.*
- too often: *Bar. Calc. carbon. Canth. Carbo veg. Chin. Ci. Con. Kali. Lyc. Nitric ac. Petr. Phosph. Phosph. ac. Sep. Sil. Sulph.*
- during the siesta: *Alumina. Caust. Clem. Mercur. Staph. Sulph.*
- without force: *Canthar. Con. Phosph. Selen.*
- deficient: *Calad. Calc. Camphor. Kali. Lach. Lyc. Natr. mur.*
- followed by languor: *Baryt. Calc. carb.*
- by anxiety: *Carbo an.*
- by head-ache: *Calcar. Lach. Sil.*
- irresistible desire: *Rhus.*
- heaviness in the limbs next day: *Puls.*
- amorous fancies: *Alumina. Ars. Aur. Baryt. Bism. Calc. Chin. Grat. Led. Natr. Nux vom. Oleand. Op. Phosphor. Plumb. Sabad. Samb. Sassap. Sil. Staph. Viol. tric.*
- SEMEN, followed by dryness of the skin: *Baryt.*
- contractive feeling in urethra: *Thuja.*
- voluptuous dreams: *Calcar. ph. Kali carb.*
- early in the morning: *Lach. N. vom. Plumb. Puls.*
- after midnight: *Samb.*
- several nights in succession: *Aur. Caust. Carb. an. Con.*
- after onanism: *Calc. Carbo veg. Chin. Natr. mur. Ph. ac. Sep. Staph.*
- without dreams: *Anac. Ant. crud. Bism. Calc. Cic. Guaj. Phosph. Puls. Ran. sc. Ruta. Stann. Verb. Zinc.*
- fancies: *Phosph.*
- thrill: *Anac. Natr. Carb. Sulph. ac. Plat.*
- painful: *Calc. Cann. Canth. Clem. Mosch. Natr. carb. Sassap. Thuja.*



—with cutting in urethra: Bor.  
 —with cutting in urethra afterwards:  
 Natr. mur.

—too late: Agar. Calc. *Lach.* *Lyc.*  
 Petr.

SEXUAL INTERCOURSE, aversion to: Agar. Cann. Caust. *Clemat.*  
*Kali.* *Lyc.* Phosph. Rhod.

—desire for: Calcar. *Canth.* *Chin.*  
*Lach.* *Mosch.* Phos. *Puls.* Stann.  
 Veratr.

—falls asleep during: Bar. *Lyc.*

—followed by mental languor: Calc.  
 Sep.

—by pain in urethra: *Canth.*

—by dullness of head: Bov. *Chin.*  
*Lyc.*

—by ill-humor: Petr.

—by back-ache: N. vom.

—with relaxed penis: Con. *Lyc.* N.  
 vom.

—followed by weakness: Agar. *Calc.*  
*Kali.* *Lycop.* *Nitr. ac.* Selen.

—by sweat: Agar.

—by bruised feeling: Sil.

—by tremor of the legs: Calc.  
 carb.

SEXUAL LUST: *Calc. carb.* *Canth.*  
*Carb. veg.* *Chin.* *Graph.* Hyosc.  
*Lach.* *Mosch.* *Natr. mur.* N. vom.  
 Phosph. Plat. *Puls.* Sep. Stann.  
 Stram. *Veratr.* Zinc.

SEXUAL DESIRE TOO STRONG:  
 Agar. Alum. *Ant. crud.* Aur. Baryt.  
 Bov. *Calc.* Cann. *Canth.* *Carb. veg.*  
*China.* Coff. Con. Dig. Dulc. Ferr.  
*Graph.* Hyosc. Ign. Iod. *Kali.* *Lach.*

*Lycop.* *Manc.* *M. arct.* *M. aust.*  
 Men. *Merc.* *Mosch.* *Natr. mur.* N.  
 vom. *Op.* Petr. Phos. Plat. Plumb.  
*Puls.* Rhus Ruta. Sabin. Sep. Sil.  
 Staph. Stram. Sulph. *Veratr.* Zinc.

SEXUAL DESIRE, like priapism:  
*Canth.* *Graph.* *Natr. mur.* N. vom.  
 Phosph. Plat. *Puls.* Staph.

—like satyriasis: *Canth.* *Merc.* N.  
 vom. Phosph. Sulph. Verat.

—deficient: Amm. mur. Bellad. Bor.  
*Calc. carb.* Camph. Con. *Graph.*  
 Hep. *Kali.* *Lach.* *Lyc.* Magn. c.  
*Nitr. ac.* Phosphor. ac. Rhod. Stann.  
 Sulph.

—too feeble: Alum. Ambr. Bar. Bell.  
 Bor. *Calad.* Calc. Carbo an. Caust.  
 Clem. Ferr. *Graph.* Hep. Kal. Lact.  
*Lyc.* Magn. c. Mur. ac. *Natr. mur.*  
*Nitr. ac.* *Op.* Petr. Phosph. ac.  
 Rhod. Selen. Sep. Spong. Stann.  
 Sulph. Teucr.

—with impotence: Agar. *Graph.* Se-  
 len.

SEXUAL POWER, too feeble: Agar.  
 Bar. *Calad.* Calc. *Canth.* *Chin.* Con.  
 Ignat. Mang. N. mosch. Selen. Sep.  
 Sulph. Vit.

—deficient: Agar. Agn. Ant. crud.  
 Baryt. *Calad.* Calc. Camph. Cann.  
 Carb. v. Caust. Chin. Chlor. Con.  
 Cupr. m. Ferr. *Graph.* Hep. Ign.  
 Iod. Laches. *Lyc.* *Mosch.* Mur.  
 acid. *Natr. mur.* *Nitr. acid.* N.  
 mosch. N. vom. Phosph. Plumb.  
 Rhus. Selen. Sep. Sil. Sulph. Thuj.  
 Vit. Zinc.

## FEMALE SEXUAL ORGANS AND FUNCTIONS.

### A. SEXUAL ORGANS.

#### 1. External Organs.

APHTHÆ: Carb. veg.

BURNING: Calc. *Canth.* Carbo veg.  
 Caust. *Kali.* *Lyc.* M. austr. N. vom.

Petr. Sabin. Sil. Staph. Sulph.  
 Thuj.

DAMPNESS: Aur. Sulph.

ERUPTIONS: Calc. Caust. Dulc.  
*Graph.* *Merc.* Nux vom. Petr. Rhus.  
 Sep. Staph. Sulph. Veratr.

GENERALLY: *Acon. Agar. Alum. Ambr. Amm. Ant. crud. Arn. Asa f. Aur. Bar. Bell. Bry. Calc. Canth. Carbo veg. Cham. Chin. Coff. Con. Creos. Dulc. Ferr. Graph. Hyosc. Kali. Lyc. Meph. Merc. Natr. Natr. mur. Nitr. ac. Nux vom. Petr. Phosph. Platin. Pulsat. Rhus. Sec. corn. Sep. Silic. Staph. Sulph. Thuj. Veratr.*

GNAWING: *Kali. Lyc. Nux vom.*

HAIR, falling out: *Natr. mur. Nitr. ac.*

HEAT: *Aur. Canth. Carbo veg. M. austr. Merc. Nux vom.*

ITCHING: *Agar. Alum. Ambr. Calc. Carbo veget. Creos. Con. Dulc. Kali bichr. Kali carb. Lyc. Merc. Natr. mur. Nux vom. Sep. Staphys. Sil. Sulph.*

NETTLE-RASH: *Ant. tart.*

PAINFULNESS: *Kali bichr. Merc. Staph.*

PIMPLES: *Graph. Kali. Merc.*

PUSTULES: *Bry. Merc.*

REDNESS: *Carbo veg.*

SWELLING: *Ambra. Amm. Aur. Canth. Carbo veg. Meph. Mercur. Nitric ac. Nux vom. Sec. corn. Sep. Thuj.*

SORENESS: *Ambr. Amm. Carbo veget. Caust. Daph. Graph. Hep. Kalic bichr. Lyc. Merc. Petr. Rhus. Sep. Sil. Sulph. Thuj.*

SORE PAIN: *Ambr. Brom. Cham. Creos. Ferr. m. Rhus. Thuj.*

STITCHES: *Aur. Con. Croc. Graphit. M. austr. Merc. Phosph. Sep. Staph. Thuj.*

TUBERCLES: *Calc. Merc. Phos.*

ULCER: *Graph. Merc. Nitric ac. Sec. corn. Sep. Thuj.*

VARICES: *Calc. carb. Carbo veg. Lyc.*

VESICLES: *Graph. Staph.*

## 2. Vagina.

BURNING: *Aur. Cham. Hyosc. Lyc. Sulph. Thuj.*

CONTRACTION: *Mosch. Rhus. Sep. Thuj.*

DRYNESS: *Bell. Lyc.*

GENERALLY: *Alum. Ambra. Aur. Ars. Bell. Calc. Canth. Capsic. Carbo veg. Caust. China. Coff. Con. Creos. Dulc. Ferr. Ferr. m. Graph. Hep. Iodine. Kali. Lyc. Mur. magn. Mercur. Natr. Natr. mur. Nitric ac. N. vom. Petr. Phosph. Plat. Puls. R'us. Sabina. Secale corn. Sep. Sil. Stann. Staph. Sulph. Sulph. acid. Thuj.*

HEAT: *Aur. Creos. Merc.*

INDURATIONS: *Bell. Sep.*

INFLAMMATION: *Merc. Nitric acid.*

—with swelling: *Merc.*

ITCHING: *Con. Creos. Sulph.*

—with voluptuous feeling: *Creos.*

LABOR-LIKE PRESSING: *Croc. Moschus. Sil.*

PAIN DURING INTERCOURSE: *Ferr.*

PROLAPSUS: *Creos. Ferr. Merc. Nux vom. Sep. Stann.*

SORENESS: *Hyosc. Kali bichr.*

—with burning: *Hyosc.*

—painful: *Ferr. m. Rhus.*

SPASMODIC PAIN: *Nux vomica. Staph.*

STITCHES: *Ars. Berb. Con. Mur. ac. Nitric ac. Puls. Rhus.*

SWELLING: *Kali bichr. Merc.*

## 3. Uterus.

CANCER: *Ars. Bell. Calc. Carb. an. Clematis. Creos. Graph. Iod. Kreosota. Lach. Phosph. Rhus. Sabina. Sec. corn. Sil. Sulph. Thuj.*

CONTRACTION: *Sep. Thuj.*

CORROSIVE ULCERATION OF OS TINCÆ: *Ars. Bell. Merc. Nitric ac. Sep. Thuj.*

## CUTTING IN THE OS UTERI:

Puls.

DESCENSION: Sec. corn.

DISTENSION: Lyc. Phosphor. ac.  
Sep.

DRAWING: Puls. Rhus.

GENERALLY: Acon. Antim. crud.

Arn. Asa f. Aur. Bell. Bov. Bryon.

Calc. Carbo an. Carbo veg. Caust.

Cham. China. Cocc. Coff. Con. Cre-

os. Croc. Ferr. Geum urb. Graph.

Hyoscyam. Ign. Iod. Ipecac. Kali.

Lach. Magn. carb. Magn. mur.

Mosch. Natr. Natr. mur. Nux mosch.

Nux vom. Op. Phosph. ac. Plat.

Puls. Rhus. Sabadilla. Sabin. Sec.

corn. Sep. Stann. Stram. Sulphur.

Thuj. Zinc.

HÆMORRHAGE: Acon. Arg. nit.

Aloë. Arn. Bell. Bry. Calc. Canth.

Carbo an. Carbo veg. Cham. Chin.

Coffea. Creos. Croc. Ferr. Hyosc.

Iod. Ipec. Lyc. Mag. m. M. austr.

Merc. Mill. Natr. carb. Nitric ac.

Nux mosch. Nux vom. Phosph. Plat.

Psor. Pulsat. Rhus. Sabin. Sec.

corn. Sep. Sil. Squill. Stram. Sulph.

INDURATION: Aur. Bell. Carb.

an. Chin. Clem. Cocc. Con. Iod.

Magn. mur. Rhus. Sep. Staph.

INFLAMMATION: Acon. Bellad.

Bry. Canth. Cham. Chin. Coff. Con.

Dulc. Ign. Lach. Merc. Nux vom.

Plat. Puls. Sabin. Sec. corn.

LABOR-LIKE PAIN: Cham. Mur.

ac. Op. Sec. corn. Sep.

POLYPI: Calc. Staph. Thuj.

PROLAPSUS: Aur. Bell. Calc. Cre-

os. Merc. N. vom. Sep. Stann.

PUTREFACTION: Carbo an. Sec.  
corn.SENSITIVENESS OF NECK OF  
UTERUS: Chin.

SORE, pain as if: Mur. ac. Rhus.

SPASMS: Bell. Bryon. Caustic.

Chamom. Cic. Cocc. Con. Geum

urb. Hyosc. Ignatia. Magn. Magn.

mur. Natr. mur. Nux vom. Plat

Pulsat. Sep. Stann.

SPASMODIC PAIN: Cocc. Ignat.

Nux vom. Thuj.

STITCHES: Muriat. acid. Phosph.  
Plat.

SWELLING: Bell. Merc. N. vom.

Sec. Sep. —

## 4. Ovaries.

DROPSY: Apis. Ars. Canthar. Dul-

cam. Iod. Mercur. Sepiae. Staph.(?)

GENERALLY: Acon. Agar. Ambr.

Ant. crud. Apis. Ars. Asa f. Aur.

Bell. Canth. Carbo an. Carbo veg.

Chin. Coloc. Con. Graph. Hyosc.

Ign. Iod. Kali. Lach. Lyc. Merc.

Mezer. Nux vom. Plat. Plumb.

Ran. bulb. Sabin. Sassap. Sec.

corn. Sep. Staph. Sulphur. Thuj.

Vit. Zinc.

INDURATION: Apis. Aur. Bellad.

Carbo an. Iod. Lach.

INFLAMMATION: Aconit. Ambra.

Ant. carb. Apis. Ars. Bell. Bry.

Canth. China. Coloc. Con. Dulc.

Ign. Lach. Mercur. Plat. Puls. Sa-

bin. Staph.

SENSITIVENESS: Apis. Plat.

SWELLING: Apis. Graph. Iod.(?)  
Lach. —

## 5. General Symptoms.

FIGWARTS: Nitric ac. Thuj.

PAIN AS IF BRUISED: Bar. m.

PRESSING TOWARDS THE

PARTS: Bell. Bov. Chin. Cha-

mom. Con. Croc. Graph. Ipec.

Kali. Merc. Mosch. Natr. Plat. Pul-

sat. Sep. Sulph. Thuj.

RUSH OF BLOOD: Bell. China.

Croc. Ign. Nux vom. Phosph. Plat.

Sec. corn. Sulph.

SORENESS BETWEEN THE

THIGHS: Arsen. Caust. Creos.

Graph. Hep. Lyc. Nitric acid.

Phosph. Rhod. Sep. Sulph.

WEIGHT, feeling of: Nux vom.

### SEXUAL FUNCTIONS AND INSTINCT.

**BLOOD**, loss of, between the periods: *Ambr. Arn. Bell. Bov. Calc. Cham. Chin. Coc. Coff. Croc. Hyosc. Kali. Ipecac. Merc. Magn. mur. Nux vom. Petr. Phosphor. Prun. Rhus. Sabin. Sec. corn. Sep. Sil. Sulph. Stram.*

—of pregnant females: *Cham. Cocc. Kali. Phosph. Sabina. Sec. corn.*

—of nursing females: *Sil.*

**INTERCOURSE**, aversion to: *Cann. Caust. Chlor. Cub. Kali. Lye. Natr. mur. Petr. Phosph.*

—desire for: *Calc. Creos. Kali. Sabin. Sulph. ac.*

—with pains: *Creos. Ferr. mur. Kali.*

—with too ready conception: *Bor. Canth. Merc. Natr.*

—with nausea: *Sil.*

—without thrill: *Ferr. m.*

**MISCARRIAGE**: *Aco. Apis. Arn. Asar. Bell. Bry. Calc. Calend. Canth. Caps. Carbo an. Carbo veg. Cham. China. Cocc. Croc. Cyel. Ferrum. Hyosc. Ipec. Iod. Kali. Lach. Lycop. Merc. Nitric ac. Nux mosch. Nux vom. Op. Phosph. Plat. Plumbum. Puls. Rhus. Ruta. Sabin. Sec. corn. Sep. Sil. Sulph. Zinc.*

—disposed to: *Asar. Calcarea. Carb. veg. Cocc. Creos. Ferr. Kali carb. Lye. Nux mosch. Plumb. Puls. Ruta. Sabin. Sabad. Sep. Sil. Sulph.*

—of chlorotic females: *Carbo veg. Chin. Ferr. Sep. Sulph.*

—with congestion of blood to the womb: *Bell. N. vom. Plat. Sep.*

—with spasms: *Cham. Hyosc. Ipec. Nux vom.*

—with leucorrhœa: *Calc. Ferr. Sep. Sulph.*

—at the outset of pregnancy: *Sabin.*

### Confinement, Ailments Incident to.

**AFTER-PAINS TOO VIOLENT, LONG**: *Arn. Bryon. Bell. Calc. carb. Cham. Coff. Cupr. Ferr. Ign. Kali. Nux vom. Puls. Rhus. Ruta. Sabina. Sep. Sulph.*

**INJURY OF PARTS DURING DELIVERY**: *Arn.*

**PAINS SPURIOUS**: *Bell. Cham. Cocc. Coff. Cupr. Hyosc. Ign. Ipec. Kali. Nux mosch. Nux vom. Op. Puls. Sec. corn. Sep. Stann.*

— —with urging on the rectum: *Nux vom.*

— —violent: *Acon. Coff.*

— —with contraction of the womb: *Bell.*

—too feeble: *Arn. Bell. Camphor. Carb. veg. Cham. Chin. Cocc. Coff. Graph. Ign. Kali. Lye. Magn. mur. Mosch. Natr. Natr. mur. N. mosch. Nux vom. Op. Puls. Rhus. Ruta. Sec. corn. Sep. Sulph. Sulph. ac.*

— —after a fright: *Op.*

— —of feeble persons: *Sec. corn.*

— —with spasmodic pains: *Puls.*

—too strong: *Acon. Arn. Aur. Bell. Cham. Cocc. Coff. Con. Hyosc. N. vom. Sec. corn. Sep.*

**PLACENTA ADHERING**: *Bell. Puls. Sec. corn.*

**SEXUAL INSTINCT EXCITED**: *Bell. Calc. Canth. Chin. Coff. Con. Creos. Ferr. Graph. Hyosc. Kali. Manc. Mosch. Nux vom. Plat. Phosph. Puls. Stram. Sulph. Sulph. ac. Thuja. Veratr. Zinc.*

—unto nymphomania: *Bell. Canthar. Hyosc. Merc. Natr. mur. Phosph. Plat. Puls. Raph. sat. Stram. Veratr.*

**SPASMS**: *Bell. Cham. Cic. Cocc. Hyosc. Ignat. Ipecac. Mosch. Plat. Stram. Veratr.*



UTERINE HÆMORRHAGE: **Bell.**

Chamom. **Chin.** *Croc.* Ferr. Ipec.  
*Plat.* **Sabin.** *Sec. corn.*

## Menses.

MENSES, pale, watery: Alum. Arn.

**Bell.** Berb. Bov. *Calc.* Carb. an.  
 Carbo veg. Coce. Con. Creos. Dig.  
*Ferr.* **Graph.** Hell. Hyosc. Ipec.  
 Kali. Led. *Lyc.* Magn. Manc. M.  
 austr. Merc. *Natr. m.* Nitr. ac. N.  
 mosch. Phosph. *Plat.* **Puls.** Rhus.  
 Sabin. *Sec. corn.* *Sep.* **Sulph.** Tart.

—brown: **Bry.** *Calc.* Carb. veg. Con.  
 Rhus.

—thick: Arn. *Croc.* Cupr. Magn.  
 c. N. mosch. N. vom. *Plat.* **Puls.**  
 Sulph.

—dark, black: *Amm.* Ant. crud. Arn.  
 Asar. *Bell.* *Bism.* Bry. Canth. Carb.  
 an. Carb. veg. **Cham.** *Chin.* *Creos.*  
*Croc.* Ferr. Ign. *Lach.* Magn. Nitr.  
 Nitr. ac. *Nux vom.* Ol. an. *Plat.*  
**Puls.** *Sec. corn.* Selen. *Sep.* Sulph.

—thin: Ferr. **Graph.** **Sabin.** *Sec.*  
*corn.*

—flesh colored: Sabin. Stront.

—too soon: Alum. *Ambr.* *Amm.*  
 Arn. Asa f. Asar. **Bell.** Bor. Bov.  
 Bry. **Calc.** Canth. Carb. an. Carb.  
 veg. Cham. Chin. Cin. *Cocc.* Colch.  
 Coloc. Con. *Creos.* *Croc.* Dulcam.  
 Ferr. *Fluor. ac.* Gent. **Graph.** Grat.  
 Hell. Hep. Ign. Iod. **Ipec.** Kali.  
 Laur. Led. *Lyc.* Magn. *M. austr.*  
 Mang. Mosch. Mur. ac. *Natr. mur.*  
 Nitr. ac. *Nux mosch.* *Nux vom.*  
 Petr. Phosph. Phosph. ac. *Plat.*  
**Puls.** Rhod. *Rhus.* **Sabin.** *Sec.*  
*corn.* *Sep.* *Silic.* Spong. Stamm.  
 Staph. *Sulph.* *Sulph. ac.* *Veratr.*  
 Zinc.

—light-colored: Arn. *Bell.* Bry. *Calc.*  
 Canth. Carb. veg. Dros. **Dulc.**  
*Hyosc.* Led. *M. austr.* Phosph.  
*Rhus.* **Sabin.** *Sec. corn.* Stront.

—too short: **Amm.** Bar. Con. Dulc.  
**Graph.** **Lach.** Magn. mur. M. aret.  
 Mang. *Mercur.* *Phosph.* *Plat.*  
**Puls.** Ruta. *Sulph.*

—too long: Acon. Ars. Asar. Bar.  
 Bryon. Canth. Carb. an. Caust.  
*Chin.* Coff. *Croc.* *Cupr.* Dulc.  
 Ferr. Ign. *Lyc.* M. austr. **Natr.**  
 mur. *Nux vom.* **Phosph.** *Plat.* **Puls.**  
 Sabin. *Sec. corn.* *Sil.* *Sulph.*  
*Sulph. acid.*

—at night: Bov. Magn. carb. Sabin.

—by fits and starts: Cham. Puls.  
 Sabin.

—acid: *Amm. carb.* Ars. Canth.  
 Carb. v. **Graph.** **Kali.** Nitr. Phosph.  
 Puls. Sassap. *Silic.* *Sulph.* Sulph.  
 ac.

—frothy: Arn. Ferr. Ipec.

—slimy: Coce. Puls.

—too scanty: Aco. Alum. *Amm.* Arn.  
 Asa. *Baryt.* Bor. Bry. *Calc.* Carb.  
 veg. *Caust.* Cicut. *Coccul.* Con.  
 Creos. Crot. Cupr. Dig. *Dulc.* Ferr.  
**Graphit.** Ign. Iod. **Kali.** Kali hydr.  
**Lach.** *Lyc.* M. aret. *Magn.* Merc.  
**Natr.** mur. Ol. an. *Phosph.* **Puls.**  
 Ruta. Sabad. Sassap. *Sep.* *Sil.*  
*Staph.* *Sulph.* Veratr. Vit. Zinc.

—too late: Acon. *Amm.* Ast. Aur.  
**Bell.** Bry. **Caust.** Chamom. *Chel.*  
 Cic. *Cocc.* Con. *Croc.* Cupr. **Dulc.**  
 Ferr. **Graph.** Hyosc. Hyp. Iod.  
 Kali. *Lach.* *Lyc.* Magn. Merc.  
 Natr. carb. **Natr.** mur. Nic. Nitr.  
 ac. *Nux mosch.* Petr. Phosph. **Puls.**  
 Rhus. Sabad. Sabin. Sassap. *Sep.*  
*Silic.* Stront. *Sulph.* *Vitr.* Zinc.

—too copious: Aco. Agar. *Ambr.*  
*Amm.* mur. Ant. cr. Arg. nitr. Ars.  
 Bar. carb. *Bell.* Bor. Bry. **Calc.**  
 Canth. Carb. v. Cham. Chel. *Chin.*  
 Cina. Coff. *Creos.* *Croc.* Cycl.  
 Dulc. Ferr. Hyosc. Ign. Iod. **Ipec.**  
 Laur. Led. *Lyc.* *M. austr.* Merc.  
 Mosch. Mur. ac. *Natr. mur.* Nitr.  
 ac. N. mosch. *Nux vom.* Phell.

**Phosph.** **Platin.** **Plumb.** **Rhus.**  
**Ruta.** **Sabin.** **Samb.** **Sec. corn.** **Sep.**  
**Sil.** **Spong.** **Stram.** **Sulph.** **Sulph.**  
*ac.* **Verat.** **Vinc.** **Zinc.**  
—too copious at night: **Amm.** **carb.**  
—lumpy: **Amm.** **carb.** **Arn.** **Bell.**  
**Canth.** **Cham.** **Chin.** **Croc.** **Ferr.**  
**Fluor.** **ac.** **Hyosc.** **Ipec.** **N.** **vom.**  
**Plat.** **Puls.** **Rhus.** **Sabina.** **Stram.**  
**Stront.**  
—irregular: **Cocc.** **Iod.** **N.** **vom.** **Puls.**  
**Ruta.**  
—suppressed: **Acon.** **Agn.** **Alum.**  
**Amm.** **Ars.** **Baryt.** **Bell.** **Bry.** **Calc.**  
**Caust.** **Cham.** **Chin.** **Cocc.** **Coloc.**  
**Con.** **Croc.** **Cupr.** **Dulc.** **Ferr.**  
**Graph.** **Hyosc.** **Ign.** **Iod.** **Kali carb.**  
**Lyc.** **M.** **arct.** **Magn.** **mur.** **Mercur.**  
**Natr.** **mur.** **N.** **mosch.** **Pæon.** **Petr.**  
**Phosph.** **Puls.** **Rhod.** **Rhus.** **Ruta.**  
**Sabad.** **Sang.** **Sassap.** **Sep.** **Silic.**  
**Staphys.** **Stram.** **Sulph.** **Valer.**  
**Verat.** **Vit.** **Zinc.**  
—of young girls, delaying: **Bry.**  
**Calc.** **Caust.** **Cocc.** **Con.** **Dulc.**  
**Graph.** **Kali.** **Lach.** **Lyc.** **Magn.**  
**Natr.** **mur.** **Petr.** **Puls.** **Sabin.** **Sep.**  
**Stramon.** **Sulph.**  
—fetid: **Bell.** **Bry.** **Carb.** **an.** **Cham.**  
**Chin.** **Croc.** **Ign.** **Kali.** **Merc.** **Phos.**  
**Rheum.** **Sabin.** **Sil.** **Sec. corn.**  
—repeating: **Alum.** **Bry.** **Ferr.** **M.**  
**arct.** **Natr.** **mur.** **N.** **vom.** **Phosph.**  
**Ph.** **ac.** **Puls.** **Rhus.** **Sep.** **Veratr.**  
**Zinc.**

## Menses and the Accompanying Ailments.

### 1. Previous to the menses.

**ABDOMEN**, distended: **Ammon.**  
**mur.** **Creos.** **Lyc.**  
—distention: **Creos.** **Lyc.**  
**ANXIETY**: **Ammon.** **Cocc.** **Con.**  
**Merc.** **Natr.** **mur.** **Stann.**  
**BACK-ACHE**: **Ann.** **Bar.** **Brom.**  
**Calc.** **Caust.** **Hyosc.** **Magnes.** **carb.**

**Mosch.** **Nitr.** **N.** **mosch.** **Nux vom.**  
**Spong.**  
**BREAST**, spasm of: **Cocc.** **Cupr.**  
**BREASTS SWOLLEN**: **Bry.** **Calc.**  
—painful: **Calc.** **Con.**  
**BURNING IN PUDENDUM**: **Calc.**  
**CANINE HUNGER**: **Magn.** **carb.**  
**CARDIALGIA**: **Lach.** **Nux mosch.**  
**Puls.** **Sep.**  
**CATARRH**: **Graph.** **Puls.**  
**CHILL**: **Lyc.** **Puls.** **Veratr.**  
**COLDNESS OF THE TRUNKS**:  
**Mang.**  
**COLIC**: **Amm.** **Bell.** **Calc.** **Cham.**  
**Puls.** **Sep.**  
—labor-like: **Hyosc.**  
—with fainting: **Sep.**  
—with vomiting: **Puls.**  
—with pressing: **Magn.** **carb.**  
**COLIC**: **Alum.** **Amm.** **mur.** **Cham.**  
**Croc.** **Ferr.** **Hyosc.** **Nux vom.** **Ol.**  
**an.** **Plat.** **Puls.**  
**COUGH**: **Graph.** **Sulph.** **Puls.**  
**DELIRIUM**: **Lyc.** **Hyosc.**  
**DIARRHŒA**: **Bov.** **Sil.** **Veratr.**  
**DREAMS**: **Calc.** **Caust.** **Con.**  
**DROWSINESS**: **Puls.**  
**EXCITED NERVES**: **Creos.** **Lyc.**  
**ERUPTION IN NAPE OF NECK**:  
**Carbo veg.**  
**EXPECTORATION**, bloody: **Phos.**  
**FACE HOT**: **Alum.** **Lyc.**  
—pale: **Puls.**  
—blue: **Veratr.**  
—bloated: **Chin.**  
**IN GENERAL**: **Alum.** **Amm.** **Asar.**  
**Bar.** **Bry.** **Calc.** **Carbo veg.** **Caustic.**  
**Cham.** **Chin.** **Coccul.** **Coff.** **Con.**  
**Creos.** **Cuprum.** **Ferr.** **Glon.** **Graph.**  
**Iod.** **Kali.** **Lach.** **Lyc.** **Manc.** **Mang.**  
**Merc.** **Mur.** **ac.** **Natr.** **mur.** **N.**  
**mosch.** **Nux vom.** **Ol.** **an.** **Phosphor.**  
**Phos.** **ac.** **Plat.** **Puls.** **Rhus.** **Sep.**  
**Sulph.** **Sulph.** **ac.** **Veratr.**  
**GUMS SWOLLEN**: **Baryt.** **Mercur.**  
**Phosph.**  
**HARD HEARING**: **Creos.**

HEAD-ACHE: *Carbo veg. Cupr.*  
 Ferr. Iod. Lach. Natr. mur. Sulph.  
 Veratr.

HEARTBURN: Sulph.

HEAT: Calc.

INCLINATION TO VOMIT: *Veratr.*

ITCHING HERPES: *Carbo veg.*

—of the parts: *Graph. Sulph.*

LABOR-LIKE PAIN: *Rhus. Plat.*

LANGUOR: *Alum. Nux mosch.*

LAUGHTER: *Hyosc.*

LEGS WEARY AND HEAVY: *Bar. Lyc.*

LEUCORRHOEA: *Alum. Calcar.*  
 Ferr. Sulph.

LIMBS AS IF BRUISED: *Nitric acid.*

LIVER, stitches in: *Con.*

—pains in the: *Nux mosch.*

LOSS OF APPETITE: *Bell.*

LOSS OF CONSCIOUSNESS:  
*China. Sep.*

MELANCHOLY: *Caust. Lyc. Natr. mur.*

NAUSEA: *Veratr.*

NOSEBLEED: *Sulph. Veratr.*

PAINS IN THE BREASTS: *Con.*

PALPITATION OF HEART: *Alumina. Cupr. Iod. Sep. Spong.*

PEEVISH: *Cham. Natr. mur.*

PRESSING TOWARD THE  
 PARTS: *Magn. carb. Plat.*

PUPILS DILATED: *Lyc.*

RUSH: *Dule.*

RESTLESSNESS: *Creos. Kali carb.*

RUSH OF BLOOD: *Alum. Cupr.*  
*Manc. Merc.*

—to the head: *Merc.*

SENSITIVENESS: *Sep.*

SHUDDERING: *Sep.*

SLEEP, RESTLESS: *Alum.*

SORENESS OF PARTS: *Kali carbon. Sil.*

SPASMS, abdominal: *Cham. Cupr.*

SPASMS: *Cham. Cocc. Coff. Cupr.*  
*Hyosc. Merc.*

—hysteric: *Hyosc.*

—in abdomen: *Carbo veget. Cham.*

2. *At the appearance of the menses.*

COLIC: *Graph. Staph.*

DIARRHOEA: *Veratr.*

FLATULENCE: *Staph.*

IN GENERAL: *Aco. Bryon. Caust.*

*Cham. Graph. Hyosc. Ign. Iodine.*

*Merc. Natr. mur. Plat. Puls. Sep.*  
*Sil.*

HEAD-ACHE: *Hyosc.*

NAUSEA: *Hyosc.*

PAINS IN LIMBS: *Sep.*

SPASMS: *Acon. Cham. Coff. Plat.*

SWEAT: *Hyosc.*

URGING TO URINATE: *Sassap.*

VOMITING: *Carbo veget. Phosph.*  
*Puls.*

3. *During the menses.*

ABDOMEN DISTENDED: *Alumina. Natr. Zinc.*

—coldness in: *Kali carb.*

—pinching in: *Alum.*

—pressure in: *Cocc. Con. Nux vom.*  
*Sec. corn.*

—cutting in: *Sulph.*

ANXIETY: *Bell. Natr. mur. Zinc.*

BACK-ACHE: *Amm. carb. Caust.*  
*Lyc.*

BLOODY EXPECTORATION:  
*Phos.*

BURNING IN ANUS: *Amm. mur.*

BURNING IN THE HANDS AND  
 FEET: *Carbo veg. Calc.*

COLIC: *Alum. Amm. Bar. Bell.*

*Calc. Carbo an. Carbo veg. Cham.*

*Cocc. Con. Graph. Kali. Ign. Lach.*

*Lyc. Magn. carb. Natr. Nitr. Nuc*

*vom. Phos. Plat. Sec. corn. Sil.*

*Stront. Sulph. Zinc.*

CONSTIPATION: *Natr. mur. Sil.*

CONVULSIONS: *Chin. Cham.*

DELIRIUM: *Hyosc.*

DISCHARGE OF BLOOD AT

STOOL: *Amm. mur.*

EARS, humming in: *Petr. Verat.*

- ERUCTION: Bry. Graph. Kali carb.
- EYES, agglutinated: Calc. carb.
- black before the: Puls.
- ERUPTION: Kali. Sil.
- FACE, pale: Amm. Graph. Lyc. Puls.
- blue: Veratr.
- color of, changing: Zinc.
- jaundiced: Caust.
- FAINTING: Ign. Lyc. Natr. mur. Nux vom.
- FEVER (chill and heat): Natr. mur. Phosph.
- CHILL: Graph. Nux vom. Puls.
- and shaking: Natr. carb.
- FLATULENCE: Cocc. Kali carb.
- IN GENERAL: Acon. Alum. Amm. carb. Amm. mur. Bell. Bov. Calc. Canth. Carbo an. Caust. Cham. Chin. Cocc. Coffea. Con. Creos. Cupr. Graph. Hyosc. Ign. Kali. Laches. Lyc. Magn. m. Mur. ac. Natr. Natr. mur. Nux vom. Phosph. Plat. Pulsat. Sabin. Sep. Sil. Stannum. Sulph. Veratr. Zinc.
- GUMS SWOLLEN: Merc. Nitr. ac.
- HEAD: congestion of: Calcarea. Caust. Chin. Con. Glon. Iod. Merc. Phosph.
- ache: Alum. Bry. Calcar. Carbo veg. Graph. Hyoseyam. Kali carb. Laur. Lyc. Magn. carb. Natr. mur. Nux vom. Phosph. Puls. Plat. Sepiæ. Snlph. Veratr.
- heat in: Calc. Cham.
- HEAT: Magn. mur. N. vom. Sep.
- LANGUOR: Alum. Bov. Carbo an. Graph. Ign. Iod. Kali. Magn. carb. Magn. mur. Nux vom. Petr. Puls. Phosphor. Sec. corn. Zinc.
- LEGS, languor in the: Sulph.
- drawing in the: Spong.
- LEUCORRHEA: Coccul.
- LIMBS AS IF BRUISED: Phosph.
- BODY AS IF BRUISED: Ambr. Conium. Petr.
- SMALL OF BACK AS IF BRUISED: Caust.
- LIMBS, cold: Cham.
- pain in: Bry. Con. Graph. Magn. mur. Nux vom. Sep. Veratr.
- LOINS, pain in: Berb. Sec. corn.
- LOSS OF CONSCIOUSNESS: Cham.
- LOSS OF APPETITE: Cupr. Magn. carb.
- LOWER LIMBS GO TO SLEEP: Puls.
- LOWER LIMBS, pain in the: Chamom. Nitr. Veratr.
- blueness of the: Ambr.
- MELANCHOLY: Manc. Natr. mur. Sep.
- MENTAL DERANGEMENT: Hyosc. Veratr.
- NAUSEA. Amm. Calc. Graph. Lyc. Magn. carb. N. vom. Phosph. Puls. Veratr.
- with water-brash: Puls.
- NIGHT-SWEAT: Bell. Graph.
- NOSE-BLEED: Sep.
- OPPRESSION: Bell. Ign. Nitr. ac.
- PAIN, labor-like: Cham. Graph. Hyosc. Lach. Sabin.
- PALPITATION OF HEART: Crot. Ign. Iod. Phosph. Sep.
- PARTS, burning in the: Rhus. Sil.
- itching in the: Hep. Lycop. Sulph. Zinc.
- pains in the: Canth. Sep.
- PRESSING DOWNWARD: Amm. carb.
- PRESSURE IN PIT OF STOMACH: Caps. Sulph.
- in small of back: Puls.
- in vertex: Calc. caust.
- DIARRHŒA: Amm. mur. Bov.
- RESTLESSNESS: Plat. Sep.
- RUSH OF BLOOD TO THE HEAD: Calc. Chin.
- SLEEP, restless: Alum. Calcar. Kali carb.
- SLEEPLESSNESS: Amm. Sep.



SMALL OF BACK, pains in: Amm.

Amm. mur. Bell. Berb. Calc. Carbo vegetabil. Cham. Cocc. Creos. Croc. Graph. Ign. Iod. Kali. Lach. Lyc. Natr. Nux vom. Phosph. Puls. Scacale corn. Sulph.

SNEEZING: Magn. carb.

SORENESS BETWEEN THE THIGHS: Graph. Kali carb. Sassap.

—of the parts: Graph. Kali carbon. Sil.

SPASMS: Acon. Cham. Cocc. Coff. Cupr. Hyosc. Ign. Lach. Nitric ac. Puls.

—in abdomen: Cham. Cocc. Graph. Mane. Nux vom. Puls. Sulph.

—with pressure down: Sep.

—in the chest: Phosph. Puls.

STITCHES IN THE PARTS: Sulphur. acid.

STOMACH, pressure in: Amm. Bry. Puls. Sassap.

SWEAT: Graph. Hyosc. Magn. mur.

SWOLLEN CHEEKS: Graph.

SWOLLEN FEET: Calcar. Graph. Lycop.

THIGHS, pain in the: Con. Magn. mur. Sassap.

THIRST: Nitr. Veratr.

TOOTH-ACHE: Amm. Calc. Cham. Carbo veget. Kali. Laur. Phosph. Sep.

TREMBLING: Hyosc. Sil.

TRISMUS: Hyosc.

URGING TO STOOL, ineffectual: Calc. Puls.

URINATION, involuntary: Calcar. carb.

URINATE, urging to: Puls. Sabin.

VERTIGO: Calc. Caustic. Iodine. Phosph. Puls. Veratr.

VOMITING: Ammon. mur. Carbo veg. Lyc. Phosph.

WHINING MOOD: Plat. Zinc.

YAWNING: Bell. Carbo animal. Phosph.

#### 4. After the menses.

ANXIETY: Phosph.

BACK, coldness in: Kali.

CARDIALGIA: Kali carb.

CHILL: Graph. Puls.

COLIC: Graph. Lyc. Nux vom.

DIARRHŒA: Graph.

ERYSIPELAS: Stram.

EXHAUSTION: Alum.

FAINTNESS: Alum. Phos. Plat.

IN GENERAL: Alum. Berb. Bor.

Bryon. Calc. Carbo an. Con. Creos.

Cupr. Graph. Kali. Lyc. Merc.

Natr. mur. Nux vom. Phosph.

Phosph. acid. Plat. Puls. Sep. Sil.

Stramon. Veratr. Zinc.

HEAD, heavy: Natr. mur.

LEUCORRHŒA: Alum. Bov.

Canth. Creos. Merc. Phosph. acid.

—bloody: Sil.

—yellowish: Phosph. acid.

PALPITATION: Iod.

PARTS, pain in the: Creos. Natr. mur.

PRESSING TO THE PARTS: Creos.

RELAXED: Alum.

SMALL OF BACK, pain in: Magn. carb. Puls.

SPASMS, abdominal: Creos.

STERILITY: Amm. Calc. Cann.

Caust. Cic. Con. Croc. Ferr. Graph.

Merc. Natr. mur. Phosph. Plat.

Plumb. Puls. Ruta. Sabin. Sepia.

Sulph. Sulph. ac.

STOOL, bloody: Graph.

TOOTH-ACHE: Calc. Magn.

VOMITING: Puls.

#### Whites.

LEUCORRHŒA: Alum. Ambra.

Amm. Amm. mur. Anac. Ant.

crudum. Ars. Bell. Bor. Bor. Bry.

Calc. Carbo an. Carbo veg. Caust.

Cham. Chin. Coccul. Con. Creos.

Drosera. Ferr. Graph. Guaj. Hep.

Iod. Kali. Lyc. Magn. Magn. mur.

**Merc.** *Mezer. Natr.* Natrum mur.

Nitric ac. *Nux vom. Petr. Phosph.*

**Pulsat.** Ran. bulb. Ruta. *Sabina.*

Sassap. **Sep.** *Sil. Squill. Stannum.*

*Sulph. Sulph. ac. Thuja. Vit. Zinc.*

1. According to its Quality.

**LEUCORRHOEA**, old: Iod.

—smarting: Cham. *Ferr. Lach. Phosph. Merc.*

—blistering: Phosph.

—pale-yellow: Merc. corr.

—bloody: Canth. Carbo veget. *Chin. Cocc. Creos. Nitric ac. Sep. Sulph. ac.*

—blood-red: Chin. Lye.

—brown: Amm. mur. Carb. an. *Nitric ac.*

—burning: Calc. Carbo an. *Con. Creos. Puls. Sulph. ac.*

—thick: Ars. Bov. Caust. Kali bichr. *Natr. mur. Puls. Sabina. Zinc.*

—thick-slimy: Bov. Con.

—thin: Carbo veg. Ol. an. *Puls. Sulph.*

—transparent: Sep. Stann. Sulph. ac.

—purulent: Calc. Chin. *Coccul. Creos. Ign. Merc. Nitric ac. Sabin. Sep.*

—albuminous: Ammon. muriat. Bor. Bov. Mez. Petr. Plat.

—staining the linen: Creos.

—flesh-colored: Cocc. Nitr. ac.

—yellow: Acon. Alum. Arsen. Bov. Carbo an. Cham. *Creos. Kali carb. Kali bichr. Lycop. Natr. Nux vom. Sabin. Sep. Stann. Sulph.*

—staining yellow: Carb. an.

—yellow-green: Bov.

—greenish: Bov. Carbo veget. Lach. *Merc. Sep.*

—green-reddish: Sep.

—ichorous: *Sabin.*

—itching: Alum. Ars. Calc. *Creos. Kali. Merc. Natr. m. Sabin. Sep.*

—milky. *Amm. Calc. Carbo veg. Creos. Ferr. Lye. Phos. Puls. Sil. Sabin.*

—milk-colored: Carbo veg.

—reddish: Calcar. China. Cocc. Nitric ac. Phosph.

—in fits and starts: Calc. Cham. Lye.

—acid: Alum. Amm. *Arsen. Bov. Calc. Carb. veg. Cham. Con. Creos. Ferr. Ign. Iod. Kali. Kali. hydr. Lye. Merc. Mezer. Natr. mur. Phosph. Puls. Ran. bulb. Ruta. Sep. Sil. Sulph.*

—slimy: Alum. Amm. m. *Bor. Bov. Calcar. Coccul. Creos. Daph. Ferr. Graph. Guaj. Lach. Magn. Merc. Mezer. Natr. Natr. mur. Nitr. acid. N. vom. Ol. an. Plumb. Puls. Sabin. Sassap. Stann. Sulph. Thuja. Zinc.*

—painless: Creos. N. vom. Puls.

—excoriating: Alum. Natr. mur.

—starch like: Sabin.

—fetid: Chin. *Creos. Natr. Nitr. ac. N. vom. Sabin. Sep.*

—watery: Amm. Ant. tart. Carb. veg. Cham. *Creos. Graph. Merc. Mezer. Mur. ac. Puls. Sep. Sil.*

—white, slimy: Graph.

—tenacious: Acon. *Bar. Bov. Mezer. Phosph. Sabin. Stann.*

2. Accompanying Ailments.

**ABDOMEN**, distended: Amm. m. Sep.

—pains in: Bell. Caustic. *Con. Creos. Ign. Lye. Magn. mur. Puls. Sil. Sulph.*

—labor-like: Dros.

**AT URINATING**: Sil.

**AFTER URINATING**: Carb. veg.

**DISCHARGED IN THE MORN-  
ING**: Natr. mur.

**FACE**, pale: Ars. *Puls. Sep.*

**IN GENERAL**: Alum. Ambr. Amm. mur. Ars. Bell. Bov. Calc. Carb. an. Caust. Cham. Cocc. *Con. Cop. Creos. Ferr. Graph. Ign. Kali Lye. Magn. Magn. mur. Merc. Natr. mur. Phosph. ac. Prun. Puls. Sabin. Sec. corn. Sep. Sil. Sulph. Sulph. ac. Zinc.*

PRESSING DOWN: <i>Natr. mur.</i>	SPASMS, abdominal: <i>Magn. mur.</i>
SMALL OF BACK, pains in: <i>Bar.</i>	STITCHES IN UTERUS: <i>Sep.</i>
<i>Caust. Graphit. Kali. Magn. mur.</i>	WEAKNESS: <i>Alum. Creos. Sep.</i>

## XXVII. EXTREMITIES.

## UPPER.

## Arm-Pit.

BORING: <i>Arg. Phosph.</i>	<i>Lycop. Natr. Oleand. Phosph. ac.</i>
BURNING: <i>Carbo veg. Cocc. Men.</i>	<i>Ran. bulb. Rhus. Sep. Staph. Sulph.</i>
<i>Phosph. Plumb. Puls. Rhus. Sep.</i>	<i>Zinc.</i>
CREAKING: <i>Croc. Daph. Merc.</i>	RAISED: <i>Merc.</i>
CRAWLING: <i>Cocc.</i>	GONE TO SLEEP: <i>Ferr.</i>
DISLOCATION-PAIN: <i>M a g n.</i>	SPOTS, brown: <i>Ant. crud.</i>
<i>Phos.</i>	STITCHES: <i>Acon. Alum. Asa f.</i>
ERUPTION: <i>Alum. Ant. crudum.</i>	<i>Bell. Bry. Calc. Caust. Cicc. Cocc.</i>
<i>Kali. Sulph.</i>	<i>Ferr. Graph. Guaj. Ign. Kali.</i>
IN GENERAL: <i>Acon. Alum. Ambr.</i>	<i>Lach. Laur. Lyc. Nitric acid. Phos.</i>
<i>Amm. mur. Asa fœt. Bell. Bry.</i>	<i>Plumb. Pulsat. Rhus. Sil. Staph.</i>
<i>Carbo veg. Caust. Chin. Colch.</i>	<i>Stann. Sulph. Thuj. Zinc. Veratr.</i>
<i>Creos. Digit. Euphorb. Ferr. Kali.</i>	SWELLING: <i>Acon.</i>
<i>Lach. Laur. Led. Lycop. Magn.</i>	—feeling of: <i>Bell.</i>
<i>Magn. mur. Merc. Mezer. Natr.</i>	TEARING: <i>Acon. Ambr. Argent.</i>
<i>Nux vom. Phosph. Puls. Rhod.</i>	<i>Bell. Bov. Bry. Caust. Canth. Carb.</i>
<i>Rhus. Sep. Sil. Squill. Stann.</i>	<i>veg. Chin. Graph. Iod. Kali. Laur.</i>
<i>Stront. Sulph. Thuj. Viola. tricol.</i>	<i>Led. Lyc. Natrum mur. Nux vom.</i>
<i>Zinc.</i>	<i>Phos. Rhus. Stront. Zinc.</i>
HEAVINESS: <i>Acon. Arn. Phosph.</i>	TENSION: <i>Dig. Euphorb. Hyosc.</i>
<i>Puls.</i>	<i>Kali. Petr. Teucr. Zinc.</i>
ITCHING: <i>Caustic. Magn. Ignat.</i>	THROBBING: <i>Daph. Magn. mur.</i>
<i>Natr. Op.</i>	<i>Rhod. Sulph. Tar.</i>
LAMENESS: <i>Lach. Puls. Sil.</i>	
MUSCLES, twitching of: <i>Croc.</i>	
<i>Spig. Spong.</i>	
PAIN AS IF BRUISED: <i>Aco.</i>	
<i>Alum. Coccul. Ferr. Ign. Lyc.</i>	
<i>Magn. Plumb. Spig. Sulph. Zinc.</i>	
PAIN, simple: <i>Bry. Daph. Graphit.</i>	
<i>Kali. Magn.</i>	
—laming: <i>Ambr. Chin. Euphor-</i>	
<i>bium. Mur. ac. Nux vom.</i>	
PRESSURE: <i>Arn. Bell. Bryon.</i>	
<i>Caust. Colch. Creos. Digital. Laur.</i>	

## Arms.

## Upper arms.\*)

BLUE SKIN: <i>Cupr. Lach. Secale</i>
<i>corn. Veratr.</i>
BORING: <i>Canth. Plumb. Rhus.</i>
BURNING: <i>Agaric. Aur. Borax.</i>
<i>Carbo veg. Dulc. Kali. Lach. Nux</i>
<i>vom. Phosph. Rhus. Sep. Zinc.</i>
BONE-PAINS: <i>Bar. Bell. Lycop.</i>
<i>Merc. Nitric ac. Thuj.</i>
COLDNESS: <i>Bell. Camph. Cham.</i>
<i>Hyosc. Kali bichr. Rhus. Veratr.</i>

\*) U. means Upper, L. Lower arms.

—feeling of: *Graph. Rhus. Sec. corn.*

CONTRACTION: *Bism. Calc.*

CONTUSIVE PAIN: *Cycl. Hell.*

CONVULSIONS: *Bell. Chamom.*

*Cocc. Cupr. Hyosc. Ipecac. Op.*

*Rhus. Squill. Secale corn. Stram. Veratr.*

CRAMPY: *Calc. Cin. Dule. Men.*

*Oleand. Phosph. Valer.*

CREEPING: *Bell. Cocc. Sec. corn. Sep.*

ERUPTION: *Ant. crudum. Canc. Carbo veg. Dule. Kali. Phos. ac. Sep.*

ERYSIPELAS: *Bell. Rhus.*

FAINTNESS: *Alumin. Anac. Arn.*

*Asar. Calcar. Cupr. Cycl. Guaj.*

*Ign. Kali. Led. Natr. mur. N. vom.*

*Plat. Plumb. Rhod. Sep. Stann. Valer.*

IN GENERAL: *Amm. mur. Antim. crud. Asa foet. Aur. Bell. Bryon.*

*Canth. Carbo an. Carbo veg. Chel.*

*Clem. Coccul. Con. Cupr. Dig.*

*Ferr. Hep. Ign. Iod. Kali. Lach.*

*Lycop. M. arct. Mang. Mezer. Mur.*

*acid. Natr. mur. Nitr. Oleand. Petr.*

*Plumb. Phos. Puls. Rhodod. Rhus.*

*Selen. Sep. Sil. Stann. Staphys. Sulph. Sulphur. ac. Valer.*

HEAT: *Bryon. Natr. mur. Nitr. acid.*

FEELING OF HEAT: *Bry. Graph. Nitric ac. Staph.*

HERPES: *Kali carb. Natr. mur. Sulph.*

—U. and L.: *Bov. Con. Dule. Graph. Natr. muriat. Phosph. Sil.*

ITCHING: *Daph. Dule. Euphorb. Lach. Laur. M. anstr. Nux vom. Oleand. Ran. sc. Ruta. Stront. Thuj.*

JERKS: *Anacard. Oleand. Ruta. Stann.*

LAMENESS: *Agar. Bism. Caust. Chel. Cocc. Kali. Lach. Nux vom. Phos. ac. Staph.*

MUSCLES, twitching of: *Coccul. Men. Valer.*

NUMBNESS: *Ambr. Aur. Bell. Cham. Coccul. Iod. Plat. Puls. Veratr.*

PAIN, simple: *Agar. Baryt. Bell. Bry. Calc. Cupr. Graph. Puls. Zinc.*

—laming: *Bell. Chamom. Dig. Natr. mur. Rhod. Sil. Zinc.*

—as if dislocated: *Alum. Bry. Euphorb. Rhod.*

—as if bruised: *Bellad. Coccul. Cycl. Daph. Ferr. Hep. M. anstr. Magn. mur. Natruu mur. Nitric ac. Plat. Plumbum. Puls. Sep. Sulph. Thuj. Veratr.*

PARALYSIS: *Agar. Bell. Caustic. Chel. Lach. Oleand. Rhus.*

PRESSURE: *Ammon. mur. Anac. Arg. Asa foet. Aur. Bell. Calcar. Camph. Cycl. Daph. Euphorb. Led. Nux vom. Petr. Puls. Rhod. Sabiu. Stann. Staphys. Sulph. Vit.*

GONE TO SLEEP: *Ambr. Baryt. Cham. Coccul. Croc. Graph. Ignat. Kali. Lach. Lycop. Magn. mur. Nux vom. Petr. Rhus. Sec. corn. Sep. Sil.*

SPASMS: *Bell. Cuprum. Ipec. Sec. corn.*

SPOTS, red: *Plat. Rhus. Sulph.*

STIFFNESS: *Amm. mur. Caust. Nux vom. Oleand. Sassap. Rhus.*

STITCHES: *Acon. Alum. Antim. crud. Arn. Asa f. Bell. Bry. Canth. Cocc. Con. Dule. Ferr. Guaj. Kali. Laur. Mang. N. mosch. Phosph. Phosph. acid. Puls. Rhod. Rhus. Sabina. Squill. Stann. Staph. Sulph. Tar. Thuj.*

SWEAT: *Asar. Ipec.*

SWELLING: *Antim. crud. Bell. Bry. Hell. Rhus.*

SWELLING OF BONES: *Rhus. Sil. Sulph.*



**TEARING**: Agar. Amm. mur. Anac.  
 Arn. Aur. Bell. Bryon. Canth.  
 Carbo an. Caustic. Chel. China.  
 Cin. Con. Digit. Dros. Ferr. Guaj.  
 Kali. Led. Lye. Mur. ac. Magnes.  
 mur. Nitr. Nux vom. Phosph.  
 Plum. Puls. Rhus. Sabina. Sassap.  
 Sil. Stann. Staphys. Sulph. Zinc.  
**TENSION**: Ant. crud. Asa fœt. Bry.  
 Dig. Laur. Rhus.  
**TREMBLING**: Ars. Bry. Capsic.  
 Caust. Cicut. Hyosc. M. aret. Op.  
 Petr. Phosph. Puls. Rhus. Sabad.  
 Sil. Spig. Sulph. Veratrum.  
**TUBERCLES**: Ant. crud. Arsenic.  
 Cal. Cocc. Nitric ac. Staph.  
**TUMORS**: Ant. crud. Ars. Caust.  
 Natr. mur. Nitric ac.  
**ULCERS**: Lach. Rhus.

### Shoulder-Joint.

**BEATING**: Magn. Merc. Thuja.  
**BURNING**: Brom. Graph.  
**CONTUSIVE PAIN**: Dros.  
**CREAKING**: Ant. tart. Bar. Cic.  
 Croc. Ferr. Merc. Thuja.  
**DISLOCATED**, as if: Magn.  
**DRAWING**: Asa f. Carbo veget.  
 Cham. Magn. mur. Staph.  
**FEELING OF WEAKNESS**: Dros.  
 —of heaviness: Puls.  
**IN GENERAL**: Arn. Asa f. Bry.  
 Calc. Carbo veg. Caust. Croc. Dros.  
 Ferr. Ign. Kali. Lach. Lye. Led.  
 Merc. Natrum mur. Nux vom.  
 Pulsat. Rhus. Staph. Sulph. Ve-  
 ratrum. Vit. Zinc.  
**HEAT**, feeling of: Brom.  
**INFLAMMATION**: Acon. Bry. Led.  
 Puls. Rhus.  
**JERKING**: Puls.  
**JERKS**: Colch. Sil.  
**LAMENESS**: Lye. Puls. Stann.  
**PAIN AS IF DISLOCATED**: Alu-  
 min. Ambr. Arn. Caps. Croc. Ign.  
 Natr. mur. Petr. Puls. Rhod. Rhus.  
 Sabina. Sep. Spigel. Thuja.

—as if bruised: Ferr. Ign. Kali. Nux vom.  
 —simple: Aco. Calc. Croc. Ign. Natr.  
 mur. Phosph.  
 —laming: Euphorb. Nux vom. Puls.  
 Staph.

**PRESSURE**: Bism. Bryon. Calcar.  
 Dros. Kali. Laur. Led. Staph. Vit.

**STIFFNESS**: Caust. Euphorbium.  
 Staph.

**STITCHES**: Asa fœt. Bry. Calcar.  
 Coccul. Croc. Ferr. Graphit. Hell.  
 Ignat. Iod. Laur. Led. Mercur.  
 Puls. Staph. Stront. Sulph. ac.  
 Thuja.

**SWELLING**: Acon. Bry. Hep.

**TEARING**: Ambr. Argent. Bism.  
 Bry. Carbo veg. Caust. Ferr.  
 Graph. Ign. Led. Merc. Phos.  
 Puls. Rhus. Sabin. Sulph. Vit.  
**TENSION**: Asa f. Bov. Bry. En-  
 phorb. Laur. Lye. Zinc.

### Arm-Pit.

**BURNING**: Carbo veg. Caust.  
**CUTTING**: Kali.  
**ERUPTION**: Lye. Merc. Natrum  
 mur. Nitric ac. Petr. Sep.  
**GLANDULAR SWELLINGS**: Bel-  
 lad. Calc. Hep. Iod. Mercur. Natr.  
 mur. Nitric ac. Sulph. Rhus. Staph.  
**SORENESS**: Carbo veg.  
**SORE**, as if: Teucr.  
**STITCHES**: Arn. Canth. Graph.  
 Men. Staph. Zinc.  
**SWEAT**: Hep. Kali. Lach. Merc.  
 Nitric ac. Phosph. Rhus. Sep.  
**TEARING**: Colch. Kali. Natr. mur.

### Lower Arm.

**BLUE SKIN**: Samb.  
**BORING**: Asa f. Natr. Phosph. ac.  
 Ran. sc.  
**BURNING**: Agar. Amm. mur. Asa  
 fœt. Carb. veget. Euphorb. Graph.  
 Merc. Mur. ac. Oleander. Rhus.  
 Sulph. Zinc.

BONE-PAIN: Kali bichr. Natr. mur. Spong.

CHILL: Ign. Puls. Rhus.

COLDNESS: Bry. Nux vom. Rhus.

CONTUSIVE PAIN: Dros.

CRAMPY: Anac. Cin. Conium. Oleand. Plat. Rhodod. Ruta. Valer.

CREEPING: Arn. Bell. Cocc. Con. Merc. Op. Sec. corn.

DEADNESS: Nux vom.

ERUPTION: Ammon. mur. Calad. Caust. Lach. Lye. Merc. Nitr. ac. Phosph. ac. Sil. Staphys. Sulph. Thuj. Zinc.

FAINTNESS: Nux vom. Rhus.

IN GENERAL: Acon. Agar. Alum. Amm. mur. Anac. Arg. Arn. Asa f. Bell. Baryt. Bism. Bryon. Calad. Calc. Camph. Canth. Carbo an. Caust. Chamom. China. Cic. Cin. Colehie. Con. Creos. Croc. Cupr. Dule. Ferr. Graph. Guaj. Hep. Hyosc. Ign. Kali carb. Laur. Lye. M. arct. Mang. Merc. Mezer. Mosch. Mur. ac. Natr. Nitr. Nitric ac. Nux vom. Oleand. Phosph. Phosph. ac. Plumb. Puls. Ran. se. Rhod. Rhus. Ruta. Sabin. Sassap. Selen. Sep. Sil. Spig. Squill. Stamm. Staph. Sulph. Tar. Teucr. Thuj. Valer. Vit. Zinc.

HEAT: Bry.

HEAVINESS: Anac. Aur. Croc. M. austr. Phos. ac. Sulph.

HERPES: Con. Magn. Merc. Nux vom.

INSENSIBILITY: Stront.

ITCHING: Agar. Amm. mur. Carb. an. Caust. Dule. Hyosc. Laur. Merc. Puls. Ran. Rhus. Spig. Sulph.

JERKS: Dule.

LAMENESS: Bellad. Calc. Caust. Dulcam. Lach. Lycop. Sil. Sulph.

PAIN AS IF BRUISED: Con. Croc. Mur. ac. Rhus. Ruta. Zinc.

—as if dislocated: Coccul. Led.

—as if sore: Arn. Cic. Rhus.

—simple: Croc. Baryt. Bellad. Calc. Graph. Phosph.

—laming: Baryt. Bism. Cycl. Dule. Mosch. Natr. mur. Nux vom. Ruta. St. Staph. Stront. Zinc.

PRESSURE: Anac. Asa f. Baryt. Bismuth. Camph. Cocc. M. arct. Mang. Oleander. Plat. Prun. Ruta. Sabin. Spigel. Staphys. Verb.

RASH: Merc. Selen.

SHOCKS: Oleand.

SPOTS, blueish: Sulph. ac. Thuj.

—red: Vit.

STITCHES: Aconit. Anac. Ant. crud. Arn. Asa f. Bell. Bov. Bryon. Calc. Carbo an. Caustic. Cicut. Cycl. Dig. Hyosc. Lycop. Magn. Merc. Mosch. Oleand. Phosphor. Phosph. ac. Ran. bulb. Sabin. Sassap. Spig. Staph. Stram. Tar. Thuj.

SWELLING: Bry. Calc. Caust. Lye. Nux vom. Rhus.

TEARING: Acon. Alum. Ammon. mur. Anac. Arg. Asa f. Aur. Baryt. Bell. Bism. Bry. Canth. Carbo veg. Caust. Cina. Coleh. Cupr. Cycl. Daph. Dig. Graph. Grat. Guaj. Kali. Lach. Lycop. Mur. ac. Magn. mur. Natr. mur. Nitric ac. Phosph. Puls. Ran. bulb. Rhod. Rhus. Sassap. Sil. Stammum. Staph. Stront. Sulph. Teucr. Thuj. Valer. Zinc.

TENSION: Anac. Arn. Caustic. Coloc. Dig. Kali. Led. Puls. Stront. Sulph. Zinc.

TROBBING: Sabad.

TREMBLING: Caustic. Nitric ac. Rhus.

TUBERCLES: Coccul.

—miliary: Agar.

WARTS: Calc. Sil.

WEAKNESS: Dulcam. Nux vom. Rhus.

### Elbow and Joint.

BONE-PAIN, nocturnal: Lye.

BORING: Caust. Thuj.

**BURNING:** *Asa fet.* Carbo animal.  
Carbo veg. *Calc. phosph.* Mercur.  
Mill. Nitr. Phosph. Plat. Rhus.  
Sulph.

**BRUISING PAIN:** Caust. Dulcam.  
*Puls.* Ruta. Sulph. **Veratr.**

**CONTRACTION:** Caust. *Laur.* Sec.  
corn.

**CONTUSIVE PAIN:** Caustic. Dros.  
Ruta.

**TEARING:** Alum. *Ambr.* Aur. Bov.  
*Canth.* China. Colchic. Daph. Iod.  
Kali carb. *Kali bichr.* Laur. **Lyc.**  
Merc. Mur. ac. *Nitr.* Nux mosch.  
Pulsat. *Rhus.* Ruta. Sassap. Sil.  
Stront. *Sulph.* Zinc.

**CREAKING:** *Ant. crud.* Conium.  
Merc. M. aret. Sulph.

**DISLOCATION PAIN:** Arn. Mang.  
Rhus.

**ERUPTION:** *Dulc.* Hyosc. *Merc.*  
Sabin. Staph. Sulph.

**FAINT FEELING:** Led

**GNAWING:** *Dulc.*

**ITCHING:** Agar. Alum. Caustic.  
Laur. Merc. *Natr.* Phosphor. Rhus.  
Sulph.

—in the bend of the elbow: *Canth.*  
Laur. Spig.

**JERKING:** *Bellad.* Caustic. Croc.  
Natr. mur. Nitric ac. Rhus. *Veratr.*

**LAMENESS:** Bell. Graph.

**PAIN, simple:** Cupr. Dig. Laur.  
Phosph. *Puls.* Sulph. ac.

—laming: *Bell.* Cham. Coccul. Daph.  
Sabin. Staph. *Stront.*

**PARALYSIS:** *Dulc.* Petr.

**PRESSURE:** Alum. Argent. Hep.  
Led. Zinc.

**STEATOMA:** Hep.

**STIFFNESS:** *Kali carb.* M. aret.  
M. austr. Stann. Thuj.

**STITCHES:** *Asa f.* *Bellad.* *Bryon.*  
Coccul. Coloc. Hell. Kali. Laur.  
Merc. Mur. ac. Nux mosch. Phosph.  
Rhod. *Sabin.* *Spig.* Spong. Thuj.

**SWELLING:** Bryon. *Hep.* *Lach.*  
*Veratr.* Vit.

**TENSION:** Daph. Dros. *Mur. ac.*  
*Puls.* Rhus. Stann. Sulph.

**THROBBING:** Rhus. *Thuj.*

**TUBERCLES:** *Caust.* Mur. ac.

**WEAKNESS:** Staph. *Sulph.*

### Bend of the Elbow.

**IN GENERAL:** Amm. mur. Anac.  
*Arn.* Bell. *Canth.* *Caust.* Clem.  
Con. Cupr. Dros. Graph. Iod. **Kali.**  
Laur. **Lyc.** Men. Petr. *Phosph.*  
*Puls.* Sep. Spig. *Sulphur.* Thuj.  
Valer. Zinc.

### Tip of the Elbow.

**IN GENERAL:** *Agar.* Alum. Bry.  
*Carbo an.* Causticum. Graph. **Hep.**  
*Merc.* Mur. ac. Oleand. Phosphor.  
ac. Rhus. Sabina. Spong. *Stann.*

### Wrist-Joints.

**BORING:** *Hell.* Rhod.

**COLD FEELING:** Rhus.

**CREAKING:** Con. Merc. *Selen.*

**DISLOCATION-PAIN:** Arn. Bov.  
Bry. *Calc. c.* *Caust.* Graph. Ign.  
*Lyc.* Nux vom. Rhodod. *Rhus.*  
*Ruta.* Sabin. Stannum. Staph.  
*Sulph.*

**ERUPTION:** *Merc.* *Calc. phosph.*  
Rhus. *Sulph.*

**EXCORIATION:** *Sulph.*

**GANGLIA:** Magn. m. *Sil.*

**IN GENERAL:** Acon. *Amm.* *Anac.*  
Arn. Ars. *Asa f.* Bism. Bov. Bry.  
*Calc. c.* *Calc. phosph.* *Carbo veg.*  
**Caustic.** Chel. Coleh. Creos. Cycl.  
Dig. Euphrasia. *Graph.* Hep.  
Hyosc. Iod. **Kali.** Led. *Lyc.* Mang.  
*Merc.* Mezer. Nitr. Phosphor. *Puls.*  
*Rhod.* Rhus. *Ruta.* Sabin. Sassap.  
*Selen.* Sep. Sil. Staphys. Stront.  
**Sulphur.** Tencr. Thuj. Verb. Zinc.

**ITCHING:** Amm. mur.

**WANT OF MOBILITY:** Sep.

**NODES**, gouty: *Calc. c. Lye.*  
**NUMBNESS**: *Bov. Croc.*  
**SPOTS**: *Kali. Petr.*  
**STIFFNESS**: *Bellad. Caust. Chel.*  
*Lach. Led. Lyc. Puls. Rhod. Ruta.*  
*Sabina. Sep. Sulphur. Thuja.*  
**STITCHES**: *Alum. Arn. Bryon.*  
*Calc. c. Caust. Con. Graphit. Hell.*  
*Kali. Laur. Merc. Natr. mur. Nux*  
*vom. Rat. Sep. Sil. Squill. Sulph.*  
**SWELLING**: *Bry. Calc.*  
**TEARING**: *Baryt. Bov. Calc. c.*  
*Carbo veg. Chel. Grat. Kali. Lach.*  
*Mezer. Ol. an. Phosph. Plumb.*  
*Puls. Rhod. Sabina. Sulph. Teucr.*  
**TENSION**: *Amm. carb. Spongia.*  
*Zinc.*  
**TREMBLING**: *Acon.*  
**TWITCHING**: *Bar. Rhus. Sulph.*  
*Valer.*  
**PAIN**: *Acon. Aminon. Asa foet.*  
*Hyosc. Merc. Nitr. Sulph.*  
 —laming: *Aconit. Asar. Bism. Eu-*  
*phorb. Kali. Led. Nux vom.*  
 —as if sprained: *Arn. Calc. c. Puls.*  
*Rhod.*  
 —as if bruised: *Calc. phosphor.*  
*Caust. Nitric ac. Puls. Ruta.*  
**PRESSURE**: *Led. Nitr. ac. Stann.*  
*Zinc.*  
**WEAKNESS**: *Merc. Phosph.*

### Hands.

**BEATING**: *Sabad.*  
**BLISTERS**: *Amm. mur. Arg. nitr.*  
*Bell. Canth. Clem. Hep. Kali. Lach.*  
*Natr. mur. Rhus. Sep. Squill.*  
*Sulph.*  
**BLUENESS**: *Aco. Camph. Cupr.*  
*Lac<sup>l</sup>. Nux vom. Rhus. Samb. Ve-*  
*ratrum.*  
**BOILS**: *Calc. carb. Hep. Lycop.*  
*Merc.*  
**BURNING**: *Acon. Anac. Aurum.*  
*Bryon. Calc. Chin. Hell. Kali.*  
*Lach. Laur. Nux mosch. Nux vom.*

*Op. Phosph. Sec. corn. Sep. Squill.*  
*Stann. Staphys. Sulph. Zinc.*  
**BRITTLE**, skin: *Graph. Natr. mur.*  
**CHILBLAINS**: *Agar. Nitr. ac. Petr.*  
*Phosph. Puls. Stann. Sulph.*  
**CHILLINESS**: *Ambr. Anac. Merc.*  
*Nux vom. Petr.*  
**COLDNESS**: *Acon. Agar. Ambr.*  
*Arn. Aur. Bar. Bell. Calc. c. Camph.*  
*Cann. Caustic. Cham. Chin. Crot.*  
*Cuprum. Cycl. Daph. Dig. Dros.*  
*Ferr. Hell. Iod. Ipecac. Kali. M.*  
*arct. Mang. Nitric ac. Nux vom.*  
*Phosph. Puls. Ranunc. bulb. Rhus.*  
*Samb. Sep. Spigelia. Sulph. Thuja.*  
*Veratr. Vit.*  
 —feeling of: *Rhus. Sec. corn.*  
**CONTRACTION**: *Cann. Cin. Merc.*  
*Nux vom. Prun. Sec. corn.*  
**CRAMPY FEELING**: *Acon. Ambr.*  
*Anac. Asa f. Aur. Calc. carb. Cann.*  
*Euphr. Graph. Lycop. Mang. Men.*  
*Mercur. Mosch. Nitr. Nux vom.*  
*Plat. Sil. Spig. Spong. Stram.*  
**CREEPING**: *Arn. Ars. Bar. Bell.*  
*Caust. Croc. Lach. Laur. Nux vom.*  
*Phosph. Plat. Rhodod. Ruta. Sec.*  
*corn. Spig. Sulphur. Veratr.*  
 —as if gone to sleep: *Bry.*  
**DEADNESS**: *Calc. Con. Laches.*  
*Nux vom. Phosph. Rhus. Sec. corn.*  
*Sil. Zinc.*  
**DESQUAMATION OF HANDS**:  
*Amm. Barr. Ferr. Merc. Phosph.*  
*ac. Sep. Sulph.*  
**DISLOCATION-PAIN**: *Bar. Rhus.*  
**DRY PALMS OF HANDS**: *Bism.*  
**DRYNESS**: *Lyc. Natrum. Sabad*  
*Sulph.*  
**EMACIATION**: *Graph. Gratiola.*  
*Selen.*  
**ERUPTION**: *Alum. Antim. crud.*  
*Ars. Canth. Carbo veget. Cic.*  
*Hep. Lyc. Merc. Mur. ac. Nitric*  
*ac Rhus. Secale corn. Selen. Spig.*  
*Staph. Sulphur. Sulph. ac. Zinc.*  
**ERYSIPELAS**: *Ran. bulb. Rhus.*



IN GENERAL: *Acon.* Agar. Ambr. Amm. *Anac.* Arg. Arn. Ars. Asa f. Aur. Bar. **Bell.** Bism. Bry. **Calc.** *Carbo veg.* **Caustic.** Chamom. Clin. Coccul. *Creos.* Cupr. Dig. Dule. Ferr. Graph. *Hep.* Ipec. *Kali.* Lach. Laur. Led. *Lyc.* *M. arct.* Mang. Men. *Merc.* Mur. ac. Natrum. *Natr. mur.* *Nux vom.* Op. *Petr.* **Phosph.** Phosph. ac. Plumb. Puls. Ran. bulb. Rhod. *Rhus.* Ruta. Samb. *Sec. corn.* Selen. *Sep.* *Sil.* Spig. Stann. Staph. **Sulph.** Veratr. Verb. *Zinc.*

HEAVINESS: Bov. Caust. Nitric. Phosph.

HEAT: *Acon.* *Bry.* **Carb. veg.** Coccul. Graph. Hell. Hepar. Led. *Lyc.* Nitric ac. N. vom. **Phosph.** *Sep.* Stann. *Staph.* *Zinc.*

HERPES: Ambr. Bov. Calcarea. Clem. *Dule.* *Merc.* *Natr. mur.* Sassa. *Sep.* *Sulph.* *Zinc.*

INSENSIBILITY: Bell. *Lyc.* *Natr. mur.* *Rhus.* *Sec. cornut.* Stann. Stront. *Zinc.*

ITCH: *Merc.* *Sep.* Selen. *Sulph.*

ITCHING: Aur. Bov. Cann. Caustic. Cina. Coccul. *Hep.* *Kali.* *Nitric ac.* Phosph. ac. Plat. Plumb. *Rhus.* *Sulph.* Veratr.

JERKS: Valer.

NODES, arthritic: *Calc.* carbon. Calc. phosph. Led. *Lyc.* Rhod. *Rhus.* *Sep.* *Sulph.*

NUMBNESS: Asa foet. Coccul. *Carbo veg.* *Lach.* *Lyc.* Puls. *Rhus.* Ruta.

PAIN: Agar. Daph. *Nux vom.* Plumb. —laming: Bell. *Bism.* Caustic. *Cycl.* Dig. *Nux vom.* *Sil.* Vit.

PARALYSIS: Ambr. Crot. Cupr. *Lach.* *Natr. mur.* *Nux vom.* Phosphor. Plumb. *Rhus.* *Sil.* *Zinc.*

PARCHED SKIN: *Lycop.* *Phosph. acid.*

PRESSURE: *Asa f.* *Calc.* *phosph.* Carbo veg. *Cycl.* *Hep.* *Kali.* Men. Nitric ac. *Staph.* *Zinc.*

REDNESS: Dule. Fluor. ac. *Nux vom.* *Sabad.* Sangu. *Staph.*

RHAGADES: *Cycl.* Graphit. *Petr.* *Sulph.*

ROUGH: Alum. *Kali.* Nitric ac. Phosph. ac.

GONE TO SLEEP: Ambra. Baryt. Carbo an. *Croc.* Fluor. acid. Graph. *Kali.* *Lach.* *Lycop.* *M. austr.* *Natr. mur.* *N. vom.* *Phosph.* Puls. *Sec. corn.* *Sil.* *Veratr.*

SORE, pain as if: Calc. c. Nitric ac. *Rhus.*

BRUISED, pain as if: Carbo veg. Dros. *Ruta.*

SPASM: Bell. Caust. *Sec. corn.*

SPASMODIC FEELING: Anac. Bell. Caust. Plat. —pain: Anac. *Caustic.* *Lycop.* *Spig.*

SPOTS: Ant. tart. *Nitr. ac.* *Sep.* —red: *Merc.* *Sep.*

STIFFNESS: Ars. Bellad. Caust. *Cham.* Coloc. *Croc.* *Mercur.* *Rhus.* *Zinc.*

STITCHES: *Aconit.* Ang. Arn. Asa f. Bellad. *Calc.* *phosphor.* Carbo an. *Caust.* Caps. Chel. Cina. Hell. Graph. Lach. Led. *Lyc.* Mosch. *Magn. mur.* Par. Plumb. Squill. Stann.

SWEAT: Ant. tart. **Calcar. c.** Cann. Chamom. Coccul. Con. *Laur.* *Natr. mur.* Nitric acid. *Nux vom.* Phosph. **Sulph.** Veratr. —cold: Caps. *Sep.* —in palm of hands: Acon. Bar. Calc. c. Con. *Dule.* *Fluor. ac.* Ignat. *Laur.* *Merc.* *Nux vom.* Rheum.

SWELLING: Aconit. Ars. Bell. *Bry.* *Calcar.* Caust. China. Coccul. Dig. Ferr. *Hep.* *Lach.* *Lyc.* *Merc.* *Nux vom.* Phosph. *Rhus.* *Ruta.* *Sec. corn.* Stann. *Sulph.* —nocturnal: Dros.

## TEARING AND DRAWING :

Agaric. Amm. *Arn.* Ars. Aur. *Bel-lad.* Calc. *Canth.* **Carbo veget.** *Caust.* Chamom. Chel. China. Colch. Cuprum. Digit. Graph. Grat. Iod. *Kali.* *Lach.* *Laur.* Led. **Lyc.** Mang. Mur. acid. Natr. mur. *Nitr.* Petr. Phell. Phos. Plumb. Rheum. **Rhod.** *Rhus.* *Sabin.* Selen. Sep. *Spig.* Stann. *Sulph.* Teucr. Verb. **Zinc.**

TENSION: Bell. Canth. Caustic. Chin. Hyp. Zinc.

TREMBLING: Agar. *Anac.* Ant. tart. Ars. Bell. Bism. Bryon. Calc. c. *Caustic.* *Chin.* **Cic.** *Coccul.* Coffea. Crotal. Ferr. magn. *Hyos-cyam.* Iod. **Kali.** *Lach.* Led. Nitr. ac. Oleand. *Op.* **Phosph.** Plat. Plumb. Rhus. Sil. Spong. Stannum. *Stram.* **Sulph.** Zinc.

TUBERCLES: Ars. Calc. Coccul. *Lyc.* Natrum mur. Nitric ac. *Rhus.*

TWITCHING: Anac. Bar. m. *Asa f.* Bell. Cina. **Cupr.** Graph. Ignat. *Lach.* Laur. **Meph.** Natr. Op. Plat. Ran. bulb. Sep. *Stann.* Sulph. ac. Vit.

ULCERS: Ars. *Lyc.* *Sil.* Sulph.

URTICARIA: Hep.

VARICOSE VEINS: Alumin. Arn. Calc. Chel. Chin. *Laur.* Men. *Nux vom.* Op. *Phosph.* **Puls.** Rheum. Rhod. Stront. **Sulphur.** *Thuj.*

CRACKED VEINS: Alum. Calc. Creos. Graph. *Lach.* *Magn. c.* Merc. Natrum mur. *Nitric ac.* **Petr.** *Sil.* Sulph. **Zinc.**

VESICLES: Daph.

WARTS: Calc. c. *Caust.* Dulcam. Rhus. Sep. *Thuj.*

WEAKNESS: Calc. **Carb. veg.** Caust. Chin. Cupr. Hell. Nitr. *Nux vom.* Phosphor. *Sil.* Tab. **Zinc.**

YELLOWNESS: Canth. Ign. Merc. *Spig.*

## Fingers.

BLOTCHES: Lach. *Lyc.* Staph.

BURNING: Asa f. Asar. Calcar. Caust. Con. Dig. Kali. *Lach.* *Natr.* Nitric ac. *Nux vomica.* *Oleand.* Plat. Sil. *Sulph.* Sulphur. ac. Veratr.

BONE-PAIN: Fluor. ac.

CHAPPING: Fluor. ac. Natrum mur. **Petr.** *Sil.*

CHAPPING OF SKIN: *Petr.*

CHILBLAINS: Agar. Croc. **Nitr.** ac. *Nux vom.* **Petr.** *Puls.* Rhus. **Sulph.**

COLDNESS: Antim. tart. Calad. *Cham.* Chel. Digit. Hell. *Lyc.* Mur. ac. Merc. Rhod. *Sulph.* Tar. *Thuj.*

CONTRACTION: Ambra. Anacard. Antim. tart. Arg. Bism. Calc. Caustic. Cina. Colehic. Coloc. Graph. *Lyc.* Merc. *Nux vom.* Plat. Rhus. *Ruta.* Sec. corn. Sep. *Sil.*

CONTRACTION OF TENDONS: *Caust.*

CRAMPY FEELING: *Anacard.* *Arn.* Ars. Asa f. Calc. Cin. Coccul. Cycl. Euphr. *Graphit.* Ignat. **Lyc.** *Mur. ac.* Mosch. *Nux vom.* Oleand. Phosph. Plat. Rhus. Stann. *Staph.* Sulphur. *Veratr.*

CREAKING: Bar. Caps. Nitr.

CREEPING: Acon. Ambr. Amm. mur. Ars. Calc. *Caust.* Cina. Croc. Graphit. Kali. M. aret. Magn. Natr. mur. Opium. Plat. *Ran. bulb.* Rhod. Rhus. Sec. corn. Sep. **Sil.** *Sulph.* *Thuj.* Veratr. Verb.

—in the tips of the fingers: Aco. Ammon. mur. Croc. M. austr. *Sec. corn.* Sep. *Thuj.*

—as of ants: Sec. corn.

—as if gone to sleep: Mur. ac.

DEADNESS: Agar. Calc. Caust. Cic. Con. Hep. *Lycop.* Merc. Nitric ac. Phosph. ac. *Puls.* *Rhus.* **Sec. corn.** Sulphur. *Thuj.* *Veratr.*

- gangrenous: *Sec. corn.*  
 —of tips of fingers: *Ant. tart. Chel.*  
**DESQUAMATION OF THE SKIN:** *Amm. mur.*  
 —on the tips of the fingers: *Sabadilla.*  
**DISLOCATION-PAIN:** *Bell. Cham.*  
*Ign. Natr. mur. Phosphor. Spig.*  
*Sulph.*  
**DRYNESS OF TIPS OF FINGERS:** *Ant. tart.*  
**ERUPTION:** *Antim. crud. Baryt.*  
*Canthar. Caust. Clem. Cycl. Daph.*  
*Graph. Lach. Lyc. Mur. ac. Phos. ac.*  
*Plumb. Puls. Rhus. Spigel. Squill.*  
*Veratr. Zine.*  
 —between the fingers: *Graph. Sulph.*  
*acid.*  
**ERYSIPELAS:** *Lyc. Rhod.*  
 — of the tips of fingers: *Thuj.*  
**EXHAUSTION:** *Sil. Rhus.*  
**HEAT:** *Sabad. Thuj.*  
**IN GENERAL:** *Acon. Alum. Ambr.*  
*Amm. mur. Anac. Antim. tart. Arn.*  
*Ars. Asa f. Baryt. Bell. Bism. Bor.*  
*Bry. Calcar. Canth. Carbo vegetab.*  
*Caust. Cham. Chel. Cie. Cina. Coc-*  
*cul. Colch. Creos. Croc. Cyclam.*  
*Dros. Ferr. Graph. Hell. Hep. Ign.*  
*Kali. Lach. Lyc. M. arct. M. austr.*  
*Magn. Mercur. Mosch. Natr. Natr.*  
*mur. Nux vom. Oleand. Phosph.*  
*Puls. Ran. Rhodod. Rhus. Ruta.*  
*Sabad. Sec. corn. Sep. Sil. Spigel.*  
*Stann. Staphys. Stront. Sulphur.*  
*Tenur. Thuj. Valer. Veratr. Verb.*  
*Vit. Zinc.*  
**HERPES:** *Ambr. Merc. Nitric ac.*  
*Ran. bulb.*  
**INFLAMMATION:** *Aco. Con. Hep.*  
*Kali. Lyc. Merc. Puls. Ran. Sil.*  
**INSENSIBILITY:** *Digit. Ferr. N.*  
*vom. Phosph. Rhus. Sec. corn.*  
 —of tips of fingers: *Ant. tart. Cham.*  
*Ferr. M. austr. Staph.*  
**ITCHING:** *Agar. Alum. Aur. Calc.*  
*Camph. Caust. Chel. Con. Cycl.*  
*Lach. Lyc. Nux vomica. Oleander.*  
*Phosph. Plumb. Puls. Rhod. Sulph.*  
*ac. Zinc. Veratr.*  
**ITCHING**, between the fingers: *Aur.*  
*Lach. Plumb. Rhod.*  
 —at the tips of fingers: *Ambra. Ant.*  
*crud. Sulph. ac. Spig.*  
**LAMENESS:** *Carbo veg.*  
 —of the thumb: *Kali.*  
**NODES**, arthritic: *Graph. Lyc.*  
**NUMBNESS:** *Ang. Calc. Caust.*  
*Con. Cina. Euphr. Ferr. Graph.*  
*Kali. Lach. Lycopod. Phosph. Plat.*  
*Rhus. Sec. corn. Sil. Staph. Sulph.*  
**PAIN:** *Caust. Led. Sassap. Veratr.*  
 —as if bruised: *Amm. carbon. Cina.*  
*Natr. mur. Nitric ac.*  
 —laming: *Bellad. Cycl. Digit. Kali.*  
*Mosch. Sabin. Sil.*  
**PARALYSIS:** *Calc. Bryon. Kali.*  
*Lach. Phosph.*  
**PRESSURE:** *Asa f. Bell. Con. Cycl.*  
*Dig. Hell. Hyosc. Ran. Rhod. Ruta.*  
*Sassap. Staphys. Tar. Teuer. Vit.*  
*Zinc.*  
**REDNESS:** *Agar. Nux vomica.*  
**RIGIDITY:** *Ars. Merc.*  
**GOING TO SLEEP:** *Acon. Ambra.*  
*Amm. mur. Aur. Bar. Calc. Carbo*  
*an. Cham. Cina. Croc. Dig. Graph.*  
*Iod. Kali. Lach. Lyc. Merc. Magn.*  
*mur. Natr. mur. Nux vom. Par.*  
*Petr. Phosph. Plumb. Puls. Rhus.*  
*Sassap. Sec. corn. Sep. Sil. Staph.*  
*Sulphur. Thuj. Veratr.*  
**SORE BETWEEN THE FINGERS:** *Graphites.*  
**SPASM:** *Bellad. Chamom. Hyper.*  
*Ign. Nux vom. Rhus. Veratr.*  
**SPASMODIC FEELING:** *Anac.*  
*Bell. Caust. Digit. Nux vom. Plat.*  
*Rhod.*  
**SPOTS**, yellow: *Con. Petr. Sabadilla.*  
 —dark: *Ant. tart.*  
 —red: *Plumb. Zinc.*  
**STITCHES:** *Ambr. Ammon. mur.*  
*Anac. Arn. Bryon. Carbo an. Car-*  
*bo veg. Caust. Colch. Croc. Daph.*

Dig. Graph. Kali. *Lach. Lyc.*  
 Merc. Mur. ac. *Natrum mur.* Nux  
 vom. *Oleand.* Petr. Phosph. Ran.  
 se. Rhod. *Rhus.* Sabad. Sassap.  
 Staun. Staph. *Sulph. ac.* Teucr.  
*Thuj.* Verb. Zinc.

SWELLING: *Amm. carb.* Arsenic.  
 Bry. Calc. Hep. Iod. *Lach. Lyc.*  
 Magn. Merc. [Nitr. *Nux vom.*  
 Phosph. Ran. seel. *Rhus.* Sil.  
*Sulph. Thuj.*  
 —feeling as of a: Bell.

TEARING: *Agar. Ambr. Ammon.*  
*mur.* Arsen. Aur. Bell. Bism.  
 Canth. Carbo veg. *Caust.* Chel.  
*Colch.* Daph. Hell. Ign. Iod. *Kali.*  
*Lach.* Laur. *Lyc.* Magn. Merc. Mur.  
 ac. *Natrum mur.* Nitr. Ol. an. Par.  
 Phos. ac. *Plumb.* Ran. bulb. *Rhod.*  
*Sabin.* Sil. Spig. *Stann.* Staph.  
*Sulph.* Teucr. Zinc.

TENSION: Canth. Iod. Phosph.  
 Plumb. Puls. *Veratr.*

THROBBING: *Carbo veget.* Crot.  
 Sil. Sabad. Teucr.

THUMB GOES TO SLEEP: Kali.  
 Plumb.  
 —clenched: Bell. Cham. *Hyosc.* Ign.  
*Rhus.*

TREMBLING: Ambr. *Bry.* *Rhus.*  
*Stront.*

TWITCHING: Alum. Amm. mur.  
 Anac. *Bry. Caust. Cham. Cic.* Cin.  
 Crotal. *Cupr.* Dig. Ign. *Lycop. M.*  
 austr. Merc. Ol. an. *Phosph.* Plumb.  
 Rheum. Rhod. *Rhus.* Sabad. Stann.  
*Sulph. Sulph. ac.*

ULCERS: Alum. *Ars.* *Caust.* *Lyc.*  
*Natrum mur.* Ran. bulb. *Sil. Sulph.*

URTICARIA: Hep.

WARTS: *Caust.* *Lach. Lycopod.*  
 Petr. Sep. *Sulph.*

WEAKNESS: Carbo veget. Hell.  
 Nitr. *Rhus. Sil.*

YELLOW, turning: Chel.

## Finger-Joints.

BORING: Hell.

CRAMP-PAIN: Euphr. Magan. Plat.  
*Sulph.*

CREAKING: Baryt. Caps. Meph.  
 Nitr.

DISLOCATION-PAIN: *Natrum*  
*mur.* Phosph. *Sulph.*

DRY, as if: *Puls.*

IN GENERAL: Ambr. Amm. Aur.  
 Bell. Calc. Caps. Carbo veg. *Caust.*  
 Cham. Chin. Colch. Con. Creos.  
 Drosera. *Graph.* Hell. Hep. Ignat.  
*Kali.* Led. *Lyc.* Mang. Merc. *Natr.*  
*mur.* Nitr. Nitric ac. Nux vomica.  
*Oleand.* Phosph. Plat. *Puls.* Rhod.  
*Rhus. Ruta. Sep. Sil. Spig.* Spong-  
 Staph. *Sulph. Sulph. ac.*

NODES, gouty: *Calcar. Clem.* Hep.  
*Lyc. Rhod. Staph.*

PAIN: Kali. *Sil. Sulph*  
 —laming: Bell. Calc.

PRESSURE: Led. Merc. Zinc.

REDNESS: *Lyc.* Spong.

STIFFNESS: Aur. *Ars. Carbo an.*  
*Caust. Graph. Hep. Lycopod.*  
*Rhus. Sep. Sulph.*

STITCHES: Arn. Bar. Bry. *Carbo*  
*veg.* Con. Hell. Ign. Men. Nitric  
 ac. *Rhus. Sabin. Sepiæ. Sulph. ac.*

SWELLING: *Euphr. Hep. Lycop.*  
 Nitric ac.

TEARING: Agar. Ammon. Anac.  
 Aur. Bell. Bryon. Carbo veg. *Caust.*  
 Chel. *Colch.* Hell. Kali. Led. *Lyc.*  
 Phosph. acid. Plat. Puls. Rheum.  
 Rhodod. *Rhus. Ruta. Sabin. Samb.*  
 Spig. *Staph. Sulph.* Teucr. Zinc.

TENSION: Iod. Nitric ac. Puls. Sep.

ULCERS: Sep.

—

Tips of Fingers.

IN GENERAL: Ambr. Ammon. mur.  
 Ant. tart. Asa f. Bor. Calc. Chel.  
 Croc. Hep. *Lach. M. austr. Phos.*  
 Pulsat. *Rhus. Sec. corn. Sep. Sil.*  
*Spig. Staph. Sulphur. Teucr. Thuj.*  
*Veratr.*



## Finger-Nails.

ALTERED COLOR: *Ars.* *Mur.* *ac.*BLUE: *Chel.* *Chin.* *Chlor.* *Crotal.**Dig.* *Nux vom.* *Petr.*DISTORTION: *Graph.* *Sep.* *Sulph.*EXFOLIATION: *Graphit.* *Mercur.* *Sulph.*IN GENERAL: *Alum.* *Ant.* *crud.**Arsen.* *Bar.* *Bism.* *Bor.* *Bov.* *Calc.**Caust.* *Chel.* *Colch.* *Con.* *Crotal.**Digit.* *Graph.* *Hep.* *Kali.* *Iodine.**Lach.* *M.* *austr.* *Merc.* *Natr.* *mur.**Nitr.* *Nitric ac.* *Nux vom.* *Phosph.**Pulsat.* *Ran.* *bulb.* *Sabad.* *Sep.* *Sil.**Sulph.* *Sulph. ac.* *Thuj.*GNAWING: *Alum.*GROWTH, slow: *Ant.* *crud.*HANG-NAILS: *Natr.* *mur.* *Rhus.**Stann.* *Sulph.*NAILS, brittle: *Graphit.* *Mercur.* *Thuj.*—growing in: *Sil.* *Sulph.*PRESSURE: *Calc.* *Caust.*TEARING UNDER THE NAILS: *Sil.*—all round: *Ambr.* *Lyc.*THICKENING: *Graph.* *Sabad.*ULCERATED: *Alum.* *Arsen.* *Bar.**Calcar.* *Conium.* *Hep.* *Kali.* *Laches.**Lycopod.* *Mercur.* *M.* *austr.* *Natr.**mur.* *Petr.* *Phosph.* *Scpiæ.* *Silic.**Sulph.* *Thuj.*ULCERATIVE PAIN: *Bellad.* *Con.**Graph.* *Hep.* *Kali.* *Merc.* *Plat.* *Puls.**Sil.* *Sulph.* *Sulph. acid.* *Thuj.*YELLOWNESS: *Ambr.* *Con.* *Merc.**Nux vom.*

## LOWER EXTREMITIES.

## Extremities.

(t. signifies thigh, l. leg.)

IN GENERAL: *Anac.* *Arn.* *Bellad.**Bry.* *Calc. c.* *Calc. phosph.* *Carbo**veg.* *Caustic.* *China.* *Colehic.* *Crot.**Dig.* *Graphit.* *Gua.* *Ignat.* *Iod.**Kali bichr.* *Kali carb.* *Lach.* *Led.**Lycop.* *Merc.* *Mezer.* *Mosch.* *Mur.**ac.* *Natr.* *Natr. mur.* *N. vom.* *Oleand.**Ol. an.* *Phosph. acid.* *Plat.* *Plumb.**Puls.* *Rhodod.* *Rhus.* *Ruta.* *Sabin.**Sep.* *Sil.* *Spigel.* *Spong.* *Staph.**Sulph.* *Thuj.* *Valer.* *Viol. tr.*

## Thighs.

BLOTCHES: *Calc. c.* *Lach.* *Merc.* *Staph.*BOILS: *Hep.* *Sep.* *Sil.*BORING: *Arn.* *Rhus.* *Staph.*BURNING: *Asa f.* *Carbo animal.**Carbo veget.* *Daph.* *Euphorb.* *Kali.**Nux vom.* *Phos.* *Plumb.* *Rhus.* *Sil.**Sulph.* *Zinc.*CARIES: *Asa f.* *Aur.* *Calc. c.* *Hep.**Merc.* *Nitric ac.* *Phos.* *Sep.* *Sil.**Sulph.*COLDNESS (t. and l.): *Ars.* *Bell.**Calad.* *Calc. c.* *Camph.* *Carbo veg.**Daph.* *Led.* *Lye.* *Nitric acid.* *Nux**vom.* *Op.* *Puls.* *Sec. corn.* *Sep.**Sulph.* *Veratr.*—feeling of: *Helleb.* *M.* *austr.* *Oleand.*—feeling of (t. and l.): *Camph.**Carb. veg.* *Chin.* *Merc.* *Natr.* *Sec.**corn.*

CONTUSIVE PAIN (t. and l.):

*Arn.* *Euphorb.* *Led.* *Nux mosch.**Rhod.* *Ruta.*CONVULSIONS (t. and l.): *Cham.**Caustic.* *Cuprum.* *Hyosc.* *Ign.**Ipec.* *Men.* *Op.* *Plumbum.* *Rhus.**Sec. corn.* *Stram.*CRAMPS: *Asar.* *Chin.* *Colch.*—(t. and l.): *Bell.* *Bism.* *Cina.* *Cupr.**Lach.* *Nux vom.* *Rhus.* *Sec. corn.**Stram.*

- CRAMPY FEELING:** *Angust. Arn. Calc. c. Cycl. Digit. Graphit. Hyosc. Lycopod. Men. Petr. Phosphor. Rhus. Sep. Valer. Veratr.*
- CREEPING:** *Arsenic. Bell. Guaj. Manc. Rhus. Sec. corn.*
- CUTTING (t. and l.):** *Alum. Bell. Bry. Graph. Lycop. Natr. Sil. Sulph. ac.*
- DISLOCATION-PAIN (t. and l.):** *Carbo veg. Caust. Led. Natr. mur. Rhus.*
- EMACIATION:** *Arg. nitr. Arsen. Calc. c. China. Iod. Lach. Merc. Nux vom. Selen.*
- ERUPTION:** *Clem. Euphorb. Graphit. Kali. Lyc. Merc. Natr. mur. Rhus. Sil. Sulph.*
- EXTERNAL SIDE:** *Anac. Asa f. Bellad. Caustic. Coccul. Euphorb. Merc. Mezer. N. vom. Phosph. ac. Rhus. Stann. Sulph. Zinc.*
- POSTERIOR SIDE:** *Alum. Antim. crud. Calc. c. Canth. Carbo veget. Caust. Con. Euphorb. Graph. Ign. Kali. Led. Lyc. Men. Merc. Mezer. Phosph. Phosph. ac. hus. Selen. Sep. Stann. Staph. Sulph. Veratr. Zinc.*
- INTERNAL SIDE:** *Ant. crud. Asa f. Calc. c. Carbo veg. Caust. Grayh. Hep. Iod. Kali. M. austr. Merc. Mur. acid. Nitric ac. Oleand. Petroleum. Rhod. Sabin. Selen. Stann. Staph. Sulph. Tar. Thuj.*
- ANTERIOR SIDE:** *Anac. Ang. Argent. Asa foet. Bar. Cann. Chin. Digit. Euphorb. Kali. Lyc. Men. Mur. ac. Natrum mur. Nux vom. Olean. Phos. ac. Sabin. Sil. Spong. Stann. Thuj. Valer.*
- FAINT FEELING:** *Arn. Ars. Bry. Chin. Croc. Dig. Guaj. Hell. Kali. Laur. Oleand. Phosph. ac. Plat. Rhodod. Ruta. Spig. Veratr.*
- (t. and l.): *Agar. Alum. Ambra. Anm. Amm. mur. Arsen. Asar. Bell. Bryon. Calc. c. Cann. Caust. China. Con. Croc. Graph. Hell. Ign. Ipec. Lach. Laur. Led. Lyc. Nitr. ac. Nux mosch. Nux vom. Phosph. Ph. ac. Plat. Plumb. Puls. Rhodod. Rhus. Ruta. Sec. corn. Sep. Stront. Sulph. Zinc.*
- FORMICATION:** *Ast. Bellad. Nux vom. Sec. corn.*
- IN GENERAL:** *Agar. Ambr. Anac. Ant. tart. Arn. Asa f. Asar. Bell. Bry. Calc. c. Caps. Carbo an. Carbo veg. Caust. Chel. Chin. Cocc. Colchic. Creos. Crotal. Cycl. Euphorb. Graph. Guaj. Hell. Hep. Ign. Kali. Lach. Led. M. austr. Merc. Mezer. Mosch. Mur. ac. Natr. mur. Nitric ac. Nux vom. Oleand. Phos. ac. Plat. Puls. Ran. bulb. Rhodod. Rhus. Sabin. Selen. Sep. Sil. Spigel. Spong. Stann. Staph. Sulph. Thuj. Zinc.*
- HEAT:** *Aconit. Bryon. Caustic. Sulph.*
- HEAVINESS:** *Alum. Ambr. Bry. Calc. c. Cann. Carbo veget. Graph. Hell. Ign. Iod. Kali. Lach. Lact. M. arct. Natrum mur. Nux vom. Puls. Rhus. Ruta. Sep. Spig. Stann. Sulphur. Sulph. ac.*
- HERPES:** *Graph. Lyc. Merc. Staph. Sulph. Zinc.*
- INSENSIBILITY (t. and l.):** *Ambr. Ars. Asar. Carbo veg. Lach. Lyc. Oleand. Op. Rhus. Sec. corn.*
- ITCHING:** *Agar. Ant. crud. Ars. Calc. c. Carbo veg. Cic. Dig. Euphorb. Graph. Lach. Led. M. arct. Merc. Natrum mur. Nitric ac. N. jugl. Nux vom. Oleand. Rhod. Sec. corn. Sil. Spig. Staphys. Sulphur. Thuj. Veratr. Zinc.*
- JERKS (t. and l.):** *Antim. tart. Calcar. c. Cic. Creos. Euphr. Merc. Phosph. Stram. Sulph. Sulph. ac.*
- LAMENESS:** *Causticum. Coccul. Oleand.*

- (t. and l.): Bell. Bry. *Caust. Coccul.* Dig. Iod. *Lach.* Manc. *Natr. mur.* N. vom. *Rhus.* Ruta. *Sec. corn.* *Sep.* *Sil.* *Sulph.* Zinc.
- MUSCLES RELAXED (t. and l.): Ambr. Calc. c. *Carbo veg.* Ferr. Iod. *Merc.* Nux vom. Phosph. ac.
- NODES, gouty: *Ant. crud.* Calc. c. Calc. ph. Lycop. *Rhus.* Staph. *Sulph.*
- NUMBNESS: Carbo veget. Ferr. *Graph.* Spong.
- (t. and l.): Ang. Asa f. Calc. c. Carbo veg. *Coccul.* Iod. Kali. *Lach.* *Merc.* N. vom. Plat. *Rhus.* *Sulph.* *Veratr.*
- PAIN (t. and l.): Arn. Anacard. Arn. Calcar. c. *Carbo veg.* Cupr. Daph. *Graph.* Lycop. Mur. ac. *Nitric ac.* Phosphor. *Rhus.* Sil. Stann. *Sulph.*
- laming: Carbo veg. Canst. Cina. *Coccul.* Ign. *Natr. mur.* *Nux vom.* *Rhus.* *Sep.*
- as if sore (t. and l.): Anac. Arn. Calcar. c. China. *Graph.* Kali. Led. Lycop. Nux vom. *Rhod.* Staph. *Sulph.*
- as if bruised: Bry. Bell. Calc. c. *Caust.* *Coccul.* Cuprum. *Graph.* Gnaj. *Hep.* Led. Men. *Natr. N. vom.* Phosph. ac. Plat. Puls. Ruta. *Sepiæ.* Spig. *Sulph.* Tar. Valer. *Veratrum.*
- (t. and l.): Bry. Bell. Canthar. *Carbo veg.* Croc. *Graph.* Laur. *Natr.* Nux mosch. *Sep.* Sil. *Stann.*
- PRESSURE: Agar. *Caps.* Digital. Gnaj. Led. Men. Mosch. Mur. ac. *Nitric ac.* Oleand. Ph. ac. Sabin. *Sassap.* Sil. *Stann.* Verb.
- PULSATIONS: Asa foet. *Coccul.* Plat.
- SHUDDERING: Cann. Chin. Ign. Phosph. Puls.
- GONE TO SLEEP: Ambra. Canth. Cham. *Coccul.* Croc. M. aret. Mosch. Nux vom. Oleander. Puls. *Rhus.* *Sec. corn.* *Veratr.*
- SORENESS BETWEEN THE THIGHS: *Graph.* Kali. *Mercur.* Rhod. Selen. *Sulph.*
- SPOTS, red: *Graph.* *Merc.*
- STAGGERING: Asar. *Coccul.* Hell. Ign. Iod. Nux vom. Oleander. Op. *Rhus.* *Sec. corn.* Stram. *Veratr.*
- STIFFNESS: *Ars.* *Graphit.* Ignat. *Natr. mur.* Oleand. Rhod.
- (t. and l.): Alum. Ang. Bell. Calc. c. *Caust.* Cic. Ferr. Ign. Kali. Led. *Merc.* *Natr. mur.* Phosph. *Rhus.* *Sep.* *Sulph.*
- STITCHING: Aco. Arn. Asa foet. Bell. Bry. Calc. c. Canstic. *Coccul.* Con. Euphr. *Graph.* Guaj. Hyosc. Laur. Mangan. Men. Nux vomica. Oleand. Phos. *Rhus.* Sabad. *Sassap.* *Sep.* Spig. Spong. *Stann.* Staph. *Sulph.* Tar. Thuja. Viol. tr. Zinc.
- STRETCHY FEELING: Bellad. Daph. Phosph. ac.
- SWEAT: Carbo an. *Merc.* N. vom. *Rhus.* Thuja.
- (t. and l.): Asa f. Hep. Phos. *Sep.* *Veratr.*
- SWELLING (t and l.): Arsen. Bry. Calc. c. *Carb. veg.* Chin. Colch. Duleam. Hell. Lyc. *Merc.* Phosph. *Sec. corn.* *Sep.* Sil. *Sulph.*
- SWELLING OF BONES (t and l.): Asa f. Aur. Calc. c. Calc. ph. Dule. Iod. Lyc. *Merc.* Phosph. Phosph. ac. *Rhus.* Sil. Staph. *Sulph.*
- TEARING AND DRAWING: Agaric. Alum. Amm. mur. Anac. Asa f. Aur. Bellad. Bry. Calc. c. Canth. Carbo an. *Caust.* Chamom. China. *Coccul.* Colchic. Daph. Dule. Euphorb. *Graph.* Guaj. Kali. Lycop. *Merc.* Mezer. *Natr. mur.* *Nitr. ac.* Nux vom. Phos. ac. Plat. Plumb. Puls. *Rhus.* *Sepiæ.* Sil. *Stann.* *Sulph.* Valer. Zinc.

**TENSION:** *Arn. Calc. c. Carbo veg. Creos. Guaj. Lyc. Merc. Men. Nitric ac. Petr. Rhod. Rhus. Sabin.* —t. and l.: *Alum. Carbo anim. Caust. Cham. Dulcam. Iod. Kali. Lyc. Natr. mur. Pulsat. Sep. Sulph. Zinc.*

**THROBBING** (t. and l.): *Antim. tart. Asa f. Bell. Brom. Bry. Dig. Kali. M. austr. Natrum mur. Phosphor. Rhus. Ruta. Sulph.*

**TREMBLING** (t. and l.): *Ammon. mur. Arn. Calc. c. Carbo veg. Caust. Cic. Con. Digit. Graph. Lach. Mercur. Natr. Nux mosch. Nux vom. Plat. Plumb. Puls. Rhus. Sil.*

**TWITCHING:** *Agn. Arn. Asa f. Caust. China. Graph. Laches. Lyc. Mang. Nux vom. Phos. Puls. Rheum. Rhus. Sep. Sil. Staph. Sulph. Valer. Veratr.*

**ULCERS:** *Calc. Sil. Thuja.*

—t. and l.: *Calc. Carbo veget. Graph. Lyc. Merc. Natrum. Nitric ac. Petr. Rhus. Sil. Sulph.*

**UNEASINESS** (t. and l.): *Ars. Cann. Carbo veg. Caustic. Chin. Con. Graph. Kali. Lach. Merc. Nux vom. Phosphor. Plat. Ruta. Sep. Sulph.*

**VARICOSE VEINS** (t. and l.): *Ambra. Arn. Ars. Calc. c. Carbo veg. Ferr. Graph. Lyc. M. austr. Puls. Sulph. Zinc.*

### Legs.

**BOILS:** *Hep. Merc. Magn. carb. Nux vom. Sil. Sulph.*

**BORING:** *Anacard. Aur. Mercur. Staph.*

**BURNING:** *Agar. Arsen. Asa f. Carbo veg. Caust. Crot. Kali. Lyc. Nux vom. Phosph. ac. Rhus. Sep. Tar. Teucr. Zinc.*

**COLD FEELING:** *Ambra. Mosch. Puls. Valer.*

**CONTRACTION:** *Ars. Canth. Coc. Lyc. Nux vom.*

**CRAMP** (in calves): *Alum. Ambra. Ang. Ars. Calc. carb. Camph. Carb. veg. Chamom. Cin. Coloc. Cupr. Dulc. Ferr. Graph. Hep. Hyosc. Ign. Laches. Led. Lyc. M. austr. Men. Natr. Natr. mur. Nitric ac. N. jugl. N. vom. Petr. Rhodod. Rhus. Samb. Sec. corn. Sep. Sil. Stram. Sulphur. Veratr. Zinc.*

**CREEPING:** *Bell. Cic. Ipec. Nux vom. Rhus. Sec. corn.*

**CUTTING:** *Calc. c. Phos. ac. Thuja.* (compt. t.)

**DIGGING:** *Spig.*

**EMACIATION:** *Phos. ac. Samb.*

**ERYSIPELAS:** *Arn. Rhus. Sulph.*

**FAINTNESS:** *Natr. mur. Oleand. Plat. Stann.*

**FLESH LOOSE,** as if: *Nux vom. Rhus.*

**IN GENERAL:** *Aco. Ambr. Amm. mur. Anac. Ant. crud. Antim. tart. Ars. Asa f. Bell. Bryon. Calc. c. Carbo veg. Canth. Caust. Cham. Chel. Conium. Creos. Cupr. Cycl. Dig. Euphorb. Ferr. Graph. Hyosc. Ign. Ipec. Kali. Lach. Led. Lyc. M. austr. Men. Mercur. Mezer. Natr. N. vom. Oleand. Phosph. Phosph. ac. Plumb. Puls. Rhod. Rhus. Sabin. Sec. corn. Sep. Sil. Spigel. Spongia. Staph. Sulph. Tar. Valer. Veratr. Vit.*

**HEAT:** *Acon. Bell. Bry. Guaj. Hyosc.*

**HEAVINESS:** *Ars. Bell. Camph. Ferr. Ign. Ipec. Laur. Lyc. Rhus. Veratr.* (comp. t.)

**HERPES:** *Lyc. Plumb. Staph. Sulph. Zinc.*

**ITCHING:** *Agar. Asa f. Aurum. Calc. c. Chel. Dulcam. Daph. Kali. Lach. Laur. Lyc. Natr. Op. Sabin. Sil. Staph. Sulph.*

**LAMENESS:** *Agar. Ars. Carb. veg.*

**NODES, gouty:** *Antim. crud. Rhus. Sulph. Staph.*



NUMBNESS: Alum. Graph. *Kali.*  
*Sil.* (comp. t.)

PAIN AS IF SORE: See t.

—as if bruised: *Alumina.* Asar.  
 Calc. c. Caust. Croc. Digital. Ferr.  
*Phosph.* Plumb. *Sepiæ.* (comp. t.)

PRESSURE: Agar. Arn. Ars. *Asa f.*  
 Bell. Camph. Cupr. Cylc. *Ign.* Led.  
 Mang. Nux mosch. Nux vom. *Phos.*  
*ac.* *Rhus.* Ruta. Sep. Stann. Tar.  
 Valer. Zinc.

PULSATIONS: *Asa foetida.* Plat.  
 Stann.

RIGIDITY, feeling of (t. and l.):  
 Cham. *Coccul.*

SHUDDERING: *Kali.*

GONE TO SLEEP: *Asa f.* *Cicuta.*  
*Ign.* Laur. *Nux vom.* Plumb. Samb.

SPOTS, blue: Arn. Lach.

—yellow: Stann.

—red: Acon. Calc. c. Conium. Merc.  
 Sulph. ac.

STIFFNESS: Ferr. *Ipec.* Petr.  
 (comp. t.)

STITCHING: Amm. mur. Anac.  
*Ant. crud.* Arn. *Asa f.* Bell. Bry.  
 Calc. c. *Carbo an.* Caustic. Chin.  
 Graph. Hell. *Ign.* Kali. M. arct.  
 Men. Mur. ac. Natr. mur. Nux vom.  
 Plumb. Phosphor. Plat. *Rhus.*  
 Ruta. *Spig.* Staph. Sulph. Valer.

SWEAT: Euphorb. Hyosc. Mercur.  
 (comp. t.)

SWELLING: Aconit. *Asa f.* Ferr.  
 Led. Puls.

TEARING AND DRAWING: Agar.  
*Alum.* Anibr. *Ant. tart.* Arn. Ars.  
 Bell. Bryon. Calc. c. *Carbo an.*  
*Carbo veg.* Caust. Cham. Colch.  
 Croc. Dulcam. Euphorb. Ferr.  
 Graph. Ignat. *Kali.* Lach. Lye. M.  
*austr.* Mezer. Magn. mur. Natrum.  
 Nux vom. Phosph. Puls. Rhod.  
*Rhus.* Sassap. Sep. *Silicea.* Spong.  
 Staph. Sulph. Valer. Zinc.

TENSION: *Asa f.* Bry. Calc. c.  
 Chamom. Cocc. Graph. *Ign.* Kali.

N. vom. Puls. *Rhus.* Spig. Valer.  
 (comp. t.)

TICKLING: Laur.

TREMBLING: See t.

TWITCHING: *Anac.* Arsen. Asar.  
 Bellad. Cina. Cupr. Graph. Hyosc.  
 Lycop. M. austr. Men. Op. Petr.  
 Plumb.

ULCERS: Ars. Calc. c. Graphit.  
 Lach. Lye. Ruta. Staph.

ULCERATIVE PAIN: Puls.

UNEASINESS: See t.

### Heels.

IN GENERAL: Ammon. mur. *Ant.*  
*crud.* Arg. Arn. Calc. c. Caust.  
 Coloc. Cycl. Graphit. *Ign.* Kali.  
 Led. Lycop. M. arct. Merc. Natr.  
 Nitric ac. Petr. Pulsat. Rhodod.  
*Rhus.* Sabin. Sec. corn. Selen. Sep.  
*Sil.* Spongia. Stann. Stront. Sulph.  
 Valer. Viola. tric.

### Feet.

BENT INWARDS: Sol. n.

BOILS: Calc. c. Merc.

BURNING: Arn. Ars. Calc. c. Coc-  
 cul. Crota. Graph. Hep. Lye.  
 Merc. Natr. Natrum mur. Phos. ac.  
 Puls. *Rhus.* Sec. corn. Sep. Sil.  
 Stann. Tar.

CHILBLAINS: *Ant. crud.* Cham.  
 Nitr. ac. Nux vom. Petr. Phosph.  
 Puls. *Rhus.* Sulph.

COLD, liable to take: Con. Sil.

COLDNESS: *Ambra.* Anim. mur.  
*Ant. crud.* *Ant. tart.* Arn. Bell.  
 Calad. Calc. c. Caustic. Chel. Chin.  
 Coff. Con. Daph. Digit. Graph. *Ign.*  
*Ipec.* Kali. Lach. Lye. Men. Mur.  
*ac.* Natr. Nux vom. Oleand. Petr.  
*Phosph.* Puls. Rhodod. *Rhus.*  
 Sabin. Samb. *Sepiæ.* Sil. Squilla.  
 Stann. Sulph. Veratr.

CORNS: *Ant. crud.* Arn. Calc. c.  
 Caust. *Ign.* Lye. Nux vom. Puls.  
 Ran. sc. *Rhus.* Sep. Sil. Sulph.

- CRAMPY FEELING:** Calc. c. Calad. *Caust.* Graph. Hep. Laches. **Lyc.** Natr. mur. Petr. Sil. *Sulph.*  
—in the soles: Calc. c. Chelid. Ferr. Euphorb. Natr. c. Selen. Sil. *Sulph.*
- CREEPING:** Arn. Bell. Caustic. *Dulc.* Graph. Ign. Natr. *Nux vom.* Phosph. Rhodod. Rhus. Sec. corn. *Sep.* Stann.
- DEADNESS:** Ant. crud. Arsenic. Calc. c. N. vom. Rhus. Sec. corn. Sil.
- DESQUAMATION:** *Dulc.*
- DRY SOLES OF FEET:** Bism.
- EXHAUSTION, feeling of:** Bellad. Bov. Cham. Croc. Ferr. *Lyc.* Phos. Plat. Rhus. *Zinc.*
- ERUPTION:** Graph. Petr. *Sulph.*
- ERYSIPELAS:** Nux vom. *Dulc.*
- FETOS:** Plumb. Sil.
- IN GENERAL:** Acon. Anac. Arn. *Ars.* Asa f. Anr. Baryt. Bell. *Bry.* Calc. c. Camph. Car. o ve. *Caust.* Cham. Conium. Creos. Cuprum. *Ferr.* Graph. Hep. Ign. Kali. Led. **Lyc.** Merc. Natr. Natr. mur. *Nux vom.* Petr. Phosph. Plumb. **Puls.** Rhod. Rhus. Ruta. Samb. Secale corn. *Sep.* Sil. Stann. *Stront.* **Sulph.** Verat. Zinc.
- GOUT:** Arn. **Bryon.** Graph. Lach. Led. *Lyc.* *Nux vom.* Oleand. Rhus. Ruta. Sabin. Veratr.
- HEAT:** Acon. Arn. *Bryon.* Calc. c. Carbo anim. Led. Nux vom. *Puls.* Phosph. *Sep.* *Sulph.*  
—of the soles: Anac. *Nux vomica.* Sangu.
- ITCHING:** Agar. Asa f. Bel. *Calc. c.* Coccul. Lach. *Lycop.* Puls. *Selen.* Stann.
- LAMENESS:** *Oleander.* Phosphor. Plumb.
- NUMBNESS:** Bryon. *Carbo veget.* Con. Op. *Phosph. ac.*
- PAIN AS IF BRUISED:** Bry. Laur. Magn. c.  
—as if sprained: Arn. *Carbo veg.*
- PRESSURE:** Asa f. Bellad. Bryon. Graph. Led. Nux vom. Plat. Stann. *Sulph. ac.*
- PULSATIONS:** Ran. bulb.
- RIGID FEELING:** Asa foet.
- GONE TO SLEEP:** Alum. Ammon. mur. Ant. tart. Bar. Cocc. *Euphorb.* Graph. Kali. Lach. Laur. *Lycop.* Nux vom. *Oleand.* Plumb. Rhod. *Sep.* Sil.
- STIFFNESS:** Ambr. Ars. Led.
- SPASM:** Bar. Bell. Nux vom. Rhus. Secale corn.
- STITCHES:** Alum. Arn. Asa foet. Bellad. Bryon. **Calc. c.** *Carbo veg.* Chin. Graph. Ign. Kali. Meph. *Mur. ac.* Natr. Natrum mur. **Nitr. acid.** Phosph. *Ran. sc.* *Sep.* Sil. *Sulph.*
- SWEAT:** Bar. *Calc. c.* Cann. *Carbo veg.* Cupr. Graph. Ipec. Kali. Led. **Lycop.** Magn. mur. Merc. *Nitr. ac.* N. jugl. Ph. ac. Pulsat. *Sep.* Sil. Squill. *Sulph.*  
—of the soles of feet: Arn. Chin. Plumb.
- SWELLING:** Amm. c. Arn. **Ars.** Asa f. Bell. **Bry.** *Calc. carb.* Caps. *Caust.* Cham. **China.** Cocc. Crotal. Digit. **Ferr.** Graph. Kali. Lach. Led. *Lyc.* Merc. Natr. Natr. mur. Petr. Phosph. **Puls.** Rhod. Rhus. **Sec. corn.** *Sep.* Sil. Stann. Staph. *Sulph.*
- TEARING AND DRAWING:** Alum. Ant. crud. Arn. Bellad. Bism. Bov. Carbo veg. *Caustic.* Chin. Colch. **Ferr.** Graphit. Hep. Lach. **Lycop.** Merc. Natr. Natr. mur. Nitric acid. Phosph. ac. Rhodod. Si<sup>l</sup>. Spig. Stann. *Stram.* **Sulph.**
- TENSION:** Bry. Led. Rhus. *Sulph.*
- TICKLING:** Laur. Rhod. Sil.
- TREMBLING:** Arn. Ars. Coffea. Stram. Veratr. Zinc.

**TWITCHING:** Arn. Chin. Capr.  
Graphit. Ign. *Ipec.* Laur. Phosph.  
*Scp.* Veratr.

**ULCERS:** Ars. *Ipec.* Lach. Merc.  
Ruta. Sec. corn. Sulph.

**ULCERATIVE PAIN:** Bry. Graph.

**UNEASINESS:** Arn. Bar. Carbo  
veg. Rhus.

### Tarsal Joints.

**BEATING:** Arg. Ruta.

**BEND, liable to:** *Carbo an.* *Natrum.* Natrum mur. Nitric ac. Nux  
vom. Rhus.

**BORING:** Spig.

**BURNING:** Calc. Euphorb. Sulphur.

**CREAKING:** Camph. Kali bichr.  
*Petr.*

**IN GENERAL:** *Ambr.* Arn. Arsen.

*Bry.* Calc. c. Carbo animal. Caust.

Creos. Cycl. *Dros.* Graph. *Hep.*

Ign. *Kali.* Led. *Lycop.* Mang. Merc.

Mezer. Natr. mur. Nitric ac. *Petr.*

Phos. Puls. Rhus. Ruta. *Scp.* Sil.

Spig. Staph. Stront. Sulph. Zinc.

**ITCHING:** Daph. Kali. *Oleand.*  
*Selen.*

**LAMENESS:** Natr. mur. Oleand.

**PAIN AS IF SPRAINED:** Arn.

*Bry.* Carbo veg. Caust. Dros. Led.

Men. Natr. Nux vom. Prun. Rhus.

Sulph. Valer.

—as if bruised: Calcarea. Hep. Valer.

—as from weariness: Croc. Nux vom.

**PRESSURE:** Camph. Daph. Led.  
Natr. Spig.

**PULLING:** Caust. Spig.

**SPASM:** Ars. Iod.

**STIFFNESS:** Capsic. Caust. Chel.

Ignat. Kali. Led. Lyc. Petr. Rhus.

Ruta. Sep. Sulph.

**STITCHES:** Arn. Ars. Asa f. Bov.

*Bry.* Caustic. Kali. Oleand. Rhus.

Spig. Sulph.

**SWELLING:** Arsen. Asa f. Bryon.

*Calc. c.* Led. Lyc. Merc. Rhod.

Rhus. Sulph.

**TEARING AND DRAWING:** Agar.

Arn. Arsen. Colch. Euphorb. Kali.

Merc. Puls. Ran. bulb. Rhod.

*Rhus.* Spong. Zinc.

**TENSION:** Bry. Lyc. Sep. Zinc.

**WEAK FEELING:** Calc. c. Carbo  
an. Merc.

### Dorsum of Feet.

**IN GENERAL:** *Asa f.* Bry. Camphor.

Caust. Hep. Lycop. Mercur.

Mur. ac. Natr. Par. Puls. Rhus.

Spig. Sulphur. Tar. Thuja. Zinc.

### Soles of Feet.

**IN GENERAL:** Ambr. Anac. Arn.

Ars. Bell. Bry. Calcar. c. Carbo

veg. Caust. Creos. Cuprum. Graph.

Lyc. Mercur. Mur. ac. Natr. Petr.

Phosph. Phosph. ac. Phell. Plumb.

Pulsat. Rhus. Sil. Stront. Sulph.

Tar.

### Hip and Joint.

**BORING:** Arn. Cin. Merc.

**BURNING:** Bell. Carbo veg. Hell.

Rhus. Ruta. Sep. Valer.

**CREAKING:** Anac. Camph.

**CRAMPY FEELING:** Bellad. Plat.

Sulph.

**CUTTING:** Alum. Cacl. c.

**IN GENERAL:** Acon. Amm. Ant.

erud. Ant. tart. Arn. Bellad. Bry.

Calc. c. Carbo veget. Caust. Coc-

cul. Coloc. Creos. Ferr. Hell. Ign.

*Ipec.* Kali. Led. Lyc. M. austr.

Mercur. Natr. mur. Nitric ac. N.

vom. Phosph. Phosph. ac. Pulsat.

Rhus. Ruta. Sep. Silicea. Stront.

Sulph. Teucr. Veratr.

**HIP-DISEASE:** Bry. Calcar. c.

Caust. Coloc. Hepar. Merc. Nitric

ac. Phosph. ac. Rhus. Ruta. Sil.

Sulph. (See Limping, spont.)

**ISCHIAS:** Aconit. Bell. Bryon.

Caust. Chamom. Coloc. Led. Merc.

Nux vom. Puls. Rhus. Ruta. Sa-

bin. Sep. Sulph.

ITCHING : Caustic. Led. Natrum.  
*Sep.*

LAMENESS : Cham. Lyc. *Veratr.*

LIMPING, spontaneous : Aconit.

Bell. Calc. c. *Caust. Coloc. Lyc.*

Merc. Rhus. Ruta. Staph. Sulph.

Zinc. (See Hip-disease.)

NUMBNESS : Lach. Staph.

PAIN, simple : Aco. Bell. Cham.

Led. Nux vom. Rhod. *Rhus. Ruta.*

—laming : Bell. Cina. Coccul. Lach.

Natr. mur.

—as if sprained : Amm. m. Arn. Bry.

*Caust. Cham. Euphorb. Ipec. Na-*

*trium mur. Nux vom. Rhus.*

—as if sore : Cic.

—as if bruised : Alum. Arn. Bry.

*Caust. Croc. Ferr. Lach. Natr.*

*Natr. mur. Phos. ac. Ruta. Sep.*

*Zinc.*

PRESSURE : Arn. Asar. Caustic.

Coccul. Euphorb. Led. Nux vom.

Ruta. Sabadilla. *Sep. Stann.*

PULLING : Natr. mur.

STIFFNESS : Bell. *Caust. Chamom.*

*Ign. Led. Sep. Staph.*

STITCHES : Alum. Bellad. Bryon.

Calc. c. *Caust. Coccul. Ferr.*

Graph. Ign. Led. Natr. mur. Nux

vom. *Rhus. Sil. Zinc.*

SWELLING : Bry. Sep.

TEARING AND DRAWING :

Alum. *Ant. crud. Bry. Carbo veg.*

*Caust. Con. Dule. Euphorb. Kali.*

*Lyc. Merc. Natr. Natr. mur. Rhod.*

*Rhus. Sep. Zinc.*

TENSION : Bell. Lyc. *Natr. mur.*

*Nitr. ac. Puls. Rhus.*

TWITCHING : Calc. carb. Coccul.

Mezer. N. vom. Sep. Sil. Sulph.

WEARINESS, feeling of : Thuj.

COLDNESS : Acon. Arsen. Chin.

Daph. Puls. Sep. Sulph.

—feeling of : Dig. Veratr.

CONTRACTION : Carbo an. Lycop.

Merc. Rhus. Sil. Sulph.

CONTRACTIVE FEELING IN

HAM-STRINGS : Con. Nitric ac.

*Rhus. Ruta. Sulph. Veratr.*

CREAKING : Camph. *Caust. Coc-*

*cul. Led. Nitric ac. Nux vom. Petr.*

*Rhus. Selen. Sulph.*

CRAMPY : Bellad. Bryon. *Caust.*

*Oleand.*

CREEPING : Rhus.

CUTTING : Graphit. Tax. Thuj.

*Veratr.*

ERUPTION : Hep. Kali. Lyc. Nux

vom. Phosph. ac. *Thuj.*

FUNGUS OF THE KNEE : Ant.

*crud. Ars. Bell. Bry. Calc. c. Iod.*

*Kali hydr. Led. Lycop. Merc.*

*Phosph. Puls. Rhodod. Rhus. Sep.*

*Sil. Sulph.*

IN GENERAL : Aco. Ambr. Amm.

*Amm. mur. Anac. Ant. crud. Arg.*

*Arn. Ars. Asa f. Asar. Bry. Calc. c.*

*Calc. phosph. Caps. Carbo veg.*

*Caustic. Chin. Colch. Con. Ferr.*

*Cycl. Graph. Hep. Iod. Kali.*

*Lachesis. Led. Lyc. Manc. M. austr.*

*Merc. Natr. Natrum mur. Nitric*

*ac. Nux mosch. Nux vom. Petr.*

*Phos. Plumb. Puls. Rheum. Rhod.*

*Rhus. Ruta. Sabad. Sep. Sil.*

*Spigel. Stann. Staph. Sulph. Tar.*

*Valer. Veratr. Vit. Zinc.*

GIVING WAY, liable to : Arnica.

Bell. *Camph. Caust. Chin. N. vom.*

*Rhod. Rhus. Ruta. Sulphur.*

HEAT, feeling of : Aur. m. Calc. c.

*Ign.*

HEAVINESS : Chin. Rhus. Verat.

HERPES : Calc. c. Natr. Natr. mur.

*Petr. Sulph.*

—in the bend of the knee : Calc. c.

Graph. Natr. Natrum mur. Psor.

Sulph.

### Knee and Joint.

ANEURYSM IN BEND OF

KNEE : Carbo veg.

BORING : Caust. *Canth.*

BURNING : Asa foet. Tabac. Carbo

veg. *Lyc. Mur. ac. Phosph. Sulph.*



ITCHING: Asa fœt. Caust. Kali.  
Lyc. Mur. ac. Nitric ac.

— in bend of the knee: Natr. Nux  
vom. Sassap.

JERKS: M. austr. Spig. Sulph. ac.

PAIN AS IF DISLOCATED: Agar.

Arn. Caust. Ipec. Men. Nitric ac.

Phos. Rhus. Spig. Staph.

— as if sore: Carbo an. Caustic. Nux  
vom. Sulph.

— as if bruised: Amm. carbon. Ars.  
Aurum. Camph. Graph. Hep. Jatr.  
Led. Nux vom. Rhus. Ruta. Stann.  
Veratr. Zinc.

PRESSURE: Alum. Asa f. Bellad.  
Calc. c. Chel. Cycl. Led. Magn.  
mur. M. austr. Rheum. Stann.  
Sulph. Thuja.

PRICKLING: Aur. m.

PULLING: Caust. Natr. mur.

SHOCK IN THE BEND OF THE  
KNEE: Veratr.

GONE TO SLEEP: Carbo veg.

SPASM: Ruta. Sulph.

SPOTS, red: Lyc. Petr. Rhus.

SPRAIN, liable to: Nux vom. Rhus.

STIFFNESS: Ambr. Ammon. mur.

Ars. Bell. Bry. Calc. Caps. Caust.

Coloc. Graph. Hell. Ignat. Kali.

Lach. Led. Lyc. Natr. mur. Nux

vom. Petr. Phosph. Pulsat. Rhus.

Sassap. Sep. Stann. Sulph.

STITCHES: Alumina. Ant. crud.

Arn. Asa f. Bell. Bry. Calc. Carbo

an. Caust. Chel. Cocc. Con. Graph.

Hell. Kali. Lach. Laur. Led. Natr.

mur. Nitric ac. Petr. Phos. Puls.

Rhus. Sassap. Sep. Sil. Stann.

Staphysag. Tab. Thuja. Valer. Veratr.

SWEAT: Calc. Led.

SWELLING: Ars. Bryon. Calc. c.

Calc. phosph. Chin. Coccul. Ferr.

Graph. Hep. Kali hydr. Iod. Lach.

Led. Lyc. Mur. ac. Nitric ac. Nux

vom. Phos. Puls. Rhod. Rhus. Sep.

Sil. Sulph.

TEARING AND DRAWING:

Aconit. Agar. Alum. Anac. Arn.

Bell. Benz. ac. Bryon. Calc. carb.

Calc. phosph. Canth. Carbo an.

Caust. Cham. China. Clem. Colch.

Crot. Euphorb. Iod. Kali. Kali

bichr. Lach. Laur. Led. Lycop. M.

austr. Merc. Mur. ac. Natrum. Nitr.

Phos. Puls. Rhod. Rhus. Sep. Sil.

Spig. Stront. Sulphur. Zinc.

TENSION: Arn. Bryon. Caustic.

Graph. Kali. Laches. Led. Nitric

ac. Nux vom. Phosph. Puls. Rhus.

Sep. Sulph.

THROBBING: Calc. c. Ruta.

TUBERCLES: Calc. c. Chin. Led.

Lyc. Nux vom.

TWITCHING: Bell. Caps. Caust.

Chin. Laur. Plumb. Sulphur.

Veratr.

UNSTEADINESS: Aconit. Arnica.

Carbo veg. Nux vom. Rhus.

WANT OF MOBILITY: Graph.

WEAK FEELING: Aconit. Arnica.

Ars. Bryon. Caust. Chin. Con.

Cupr. Ferr. Ign. Lach. Led. Lyc.

Merc. Natrum mur. Nitric ac.

Plat. Puls. Stann. Staph. Sulph.

Veratr.

WEARINESS: Asar. Cocc. Conium.

Nux mosch. Pulsat. Ruta.

### Nails.

IN GENERAL: Alum. Ars. Caust.

Graph. Hep. Hell. Mercur. Natr.

Natrum mur. Nux vom. Phosph. ac.

Sabad. Sep. Sil. Sulph.

### Tibia.

IN GENERAL: Agar. Anac. Arn.

Ars. Asa f. Bell. Calc. Caustic.

Coloc. Con. Creos. Dule. Graph.

Kali. Lach. Lycopod. Mang. Merc.

Mezer. Mur. ac. Phos. Puls. Rhod.

Rhus. Sabin. Sep. Sil. Spong. Tar.

Zinc.

Calves.

IN GENERAL: *Alum.* *Ambr.* *Ant.*  
*crud.* *Ars.* *Asa f.* *Bry.* *Calc.* *Caps.*  
*Caustic.* *Cham.* *Coloc.* *Croc.* *Cupr.*  
*Ferr.* *Graph.* *Hyosc.* *Ign.* *Led.* *Lyc.*  
*M. austr.* *Mang.* *Merc.* *Natr.* *Natr.*  
*mur.* *Nitr. ac.* *Nuxvom.* *Petr.* *Puls.*  
*Rhus.* *Sabina.* *Sec. corn.* *Sep.* *Sil.*  
*Spig.* *Stann.* *Staph.* *Sulphur.* *Tar.*  
*Valer.* *Veratr.*

Toes.

BORING: *Merc.* *Ran.* *sc.*  
 BURNING: *Arn.* *Dule.* *Nitric ac.*  
*Nuxvom.* *Staph.*  
 —in the toe-balls: *Bry.*  
 CHILBLAINS, blisters: *Ars.* *Nitric*  
*ac.* *Petr.*  
 CHILBLAINS: *Agar.* *Amm.* *Ant.*  
*crud.* *Caust.* *Nitr. ac.* *Nuxvom.*  
*Petr.* *Phosph.* *Puls.* *Rhus.* *Sulph.*  
 COLDNESS: *Calad.* *Sulph.*  
 CONTRACTION: *Cham.* *Ferrum.*  
*Hyosc.* *Nitr.* *Nuxvom.* *Lyc.* *Merc.*  
*Plat.*  
 CRAMPY: *Amm.* *Arn.* *carb.* *Bar. c.*  
*Calc.* *Caust.* *Ferr.* *Hyosc.* *Ign.* *Lyc.*  
*Mosch.* *Nuxvom.* *Plat.* *Sulph.*  
 CREEPING: *Alum.* *Asa f.* *Caust.*  
*Hep.* *Lach.* *Plat.* *Plumbum.* *Rhod.*  
*Sec. corn.*  
 DEADNESS: *Cycl.* *Sec. corn.*  
 IN GENERAL: *Agar.* *Amm.* *Arn.*  
*Aur.* *Calcar.* *Carbo an.* *Carbo veg.*  
*Caust.* *Colch.* *Graph.* *Kali.* *Magn.*  
*carb.* *Merc.* *Mezer.* *Natrum mur.*  
*Nitric ac.* *Petr.* *Phosph.* *Phos. ac.*  
*Plat.* *Ran.* *seel.* *Sabin.* *Sec. corn.*  
*Sil.* *Sulph.*  
 ITCHING: *Ambr.* *Cycl.* *Daph.* *Hep.*  
*Nuxvom.* *Pæon.* *Pulsat.* *Stront.*  
*Staph.*  
 JERKS: *Anac.* *Arn.*  
 NUMBNESS: *Arn.* *Crot.* *Phosph.*

—of toe-balls: *Puls.*

PAIN AS IF BRUISED: *Aur.*  
*Sulph.*  
 PRESSURE: *Asa f.* *Cycl.* *Graph.*  
*Nuxvom.*  
 PRICKLING: *Acon.* *Ant.* *tart.*  
 REDNESS: *Carbo veg.*  
 GONE TO SLEEP: *Cham.* *Nux*  
*vom.* *Rhus.*  
 SORENESS: *Graph.* *Natr.* *Ran.*  
*bulb.* *Sil.*  
 SPASMS: *Bar. m.* *Cham.* *Nuxvom.*  
*Ol. an.*  
 STIFFNESS: *Sec. corn.* *Sil.* *Sulph.*  
 STITCHES: *Arn.* *Asa foet.* *Calcar.*  
*Carbo veget.* *Caustic.* *Cocc.* *Graph.*  
*Lycopod.* *Natr. mur.* *Oleand.* *Puls.*  
*Ran. bulb.* *Ran. sc.* *Sil.* *Veratr.*  
*Zinc.*  
 SWEAT: *Arn.* *Sil.*  
 SWELLING: *Arn.* *Carbo veg.* *Graph.*  
*Merc.* *Nitric acid.* *Phosph.* *Sabin.*  
*Sulph.*  
 —of toe-balls: *Daph.* *Led.*  
 TEARING AND DRAWING: *Agar.*  
*Amm. mur.* *Arn.* *Ars.* *Asar.* *Camph.*  
*Caust.* *Chin.* *Cienta.* *Cycl.* *Hep.*  
*Kali.* *Lach.* *Led.* *Lyc.* *Par.* *Phos.*  
*Puls.* *Rhus.* *Sil.* *Sulph.* *Stront.* *Vit.*  
*Zinc.* *Valer.*

TICKLING: *Ambr.*

TWITCHING: *Asa f.* *Chin.* *Cupr.*  
*Merc.* *Ran. sc.*

ULCERS: *Ars.* *Caustic.* *Graph.*  
*Petr.* *Sep.*

Toe-Joints.

IN GENERAL: *Arn.* *Aur.* *Bism.*  
*Calc.* *Caust.* *Cham.* *China.* *Conium.*  
*Cycl.* *Graph.* *Hep.* *Kali.* *Led.* *Lyc.*  
*Merc.* *Phos.* *Puls.* *Rhod.* *Rhus.*  
*Ruta.* *Sabin.* *Sep.* *Sil.* *Staph.*  
*Sulph.* *Teucr.* *Valer.* *Zinc.*

## XXVIII. SKIN AND EXTERNAL SYMPTOMS.

- ABSCESSES**, acute: *Ars. Bell. Hep. Lach. Merc. Phosph. Pulsat. Sil. Sulph.*  
 —chronic: *Calc. c. Calc. ph. Con. Hep. Lach. Iod. Lycop. Merc. Nitric ac. Phosph. Sil. Staph. Sulph. Thuj.*
- BED-SORES**: *Agar. Arn. Baryt. Calc. c. Carbo veg. Caustic. Chin. Cic. Creos. Ferr. Graphit. Hepar. Ign. Lach. Lycop. Mercur. Nitric ac. Petr. Puls. Rhus. Ruta. Sep. Silic. Sulph. Sulph. ac.*
- BITING IN THE SKIN**: *Ant. crud. Bar. Canth. Cham. Dig. Graphit. Kali. Led. Lye. Nux vom. Oleand. Plat. Pulsat. Ran. sc. Rhus. Ruta. Spong. Staph. Veratr. Vit.*
- BLOATING**: *Ant. crud. Ars. Bell. Bryon. Calc. c. Caps. Cupr. Dule. Ferr. Graph. Kali. Lycop. Merc. Mosch. Oleand. Op. Pulsat. Rhus. Spig. Staph. Sulph.*
- BLOODY-TUMORS**: *Bryon. Merc. Sec. corn.*  
 —blisters: *Ars. Canth. Secale corn. Sulph.*
- BLOTCHES**: *Apis. Creos. Dule. Natr. mur. Rhus. Sulph.*
- BOILS**: *Ant. crud. Arn. Bellad. Calc. c. Carbo anim. Euphorb. Hep. Lach. Led. Lye. Merc. Mur. ac. Nitr. ac. Phosph. Phosph. ac. Sec. corn. Sep. Sil. Staph. Sulph. Sulph. ac. Thuj.*
- BLOTCHES**: *Agar. Ant. crudum. Ars. Bell. Bry. Calc. c. Carbo anim. Caust. Con. Daph. Dule. Graphit. Hep. Iod. Lach. Led. Lye. Magn. Mang. Mezer. Natrum mur. Oleand. Petr. Phosphor. Puls. Rhus. Ruta. Sec. corn. Sep. Sil. Staph. Sulph. Thuj. Verat.*
- BURNING OF SKIN**: *Aconit. Arn. Ars. Asa f. Atar. Aur. mur. Bell. Bryon. Calc. Camph. Caps. Carbo veg. Caust. Cic. Coccul. Creos. Cupr. Dig. Euphorb. Ferr. Hep. Ign. Kali. Lach. Lye. Merc. Nitr. ac. Nux vom. Op. Phosph. Puls. Rhus. Secale corn. Sep. Sil. Spig. Staph. Sulph. Sulph. ac. Veratr. Viola. tr.*
- COLOR OF THE SKIN**, blue: *Arsen. Bell. Cina. Con. Cupr. Dig. Hydr. ac. Lach. Merc. Op. Phosph. ac. Sec. corn. Veratr.*  
 —pale: *Bellad. Calc. Chin. Coccul. Ferr. Graph. Kali. Lycop. Nitricac. Nux vom. Plat. Pulsat. Sep. Spigel. Sulph.*  
 —yellow: *Ambr. Ars. Bell. Bryon. Canth. Carbo vegetab. Cham. China. Con. Ferr. Ign. Lye. Merc. N. vom. Op. Plumb. Puls. Rhus. Sep. Spig. Sulph. Veratr.*  
 —red: *Aconit. Arn. Bell. Bry. Canth. Dule. Graph. Lye. Merc. N. vom. Op. Phos. ac. Rhus. Ruta. Secale corn. Stram. Vit.*  
 —sallow: *Calc. Ferr. Iod. Laches. Merc. Natr. c. Phos. Sec. corn. Sep.*
- COMEDONES**: *Calcar. c. Natr. Natrum mur. Nitric ac. Selen. Sulph.*
- CONTUSIVE PAIN**: *Arn. Rhus. Sulph. ac.*
- CRACKING OF THE SKIN**: *Alumin. Arn. Calc. c. Cham. Creos. Hep. Kali. Lach. Lye. Natr. Natr. mur. Nitric ac. Petrol. Puls. Rhus. Sep. Sil. Sulphur. Zinc.*
- CRUSTA LACTEA**: *Calc. Carbo veg. Dule. Graph. Lye. Merc. Rhus. Sassap. Staph.*
- DAMP SKIN**: *Alum. Ars. Calc. Carbo veget. Cic. Clem. Dule. Graph. I. . Merc. Nitric ac. Petr. Rhus. Sepia. Sil. Sulph.*

**DESQUAMATION:** *Acon. Amm.*

*Amm. mur. Arsen. Aur. Bell. Bov.*  
 Caustic. *Clem. Dule. Graph. Hell.*  
*Iod. Mercur. Mezer. Oleand. Phos.*  
*Phos. ac. Puls. Rhus. Secale corn.*  
*Sep. Sil. Staph. Veratr.*

**Eruption.****IN GENERAL:** *Acon. Amm. carb.*

*Ant. crud. Arn. Ars. Aurum. Bar.*  
*Bov. Bry. Calc. carb. Canth. Carb.*  
*an. Carbo veget. Caust. Cic. Clem.*  
*Con. Cuprum. Cycl. Dule. Ferr.*  
*Graphit. Hell. Hep. Ipec. Kali.*  
*Lach. Lyc. Magn. c. Magn. m.*  
*Merc. Natr. Natr. mur. Nitric ac.*  
*Nux vom. Oleander. Petr. Phosph.*  
*ac. Puls. Rhod. Rhus. Sassap.*  
*Selen. Sepic. Sil. Spigelia. Staph.*  
*Stront. Sulphur. Sulph. ac. Thuj.*  
*Viola. tr. Zinc.*

**ERUPTION, peeling off:** *Ammon.*

*Bell. Clem. Hell. Led. Merc. Mezer.*  
*Phosph. Sepiæ. Sil. Staph.*

—smarting: *Bry. Calc. Calc. caust.*  
*Caust. Euphorb. Lach. Led. Mezer.*  
*Natr. mur. Puls. Sil. Spong.*  
*Sulph.*

—vesicular: *Ant. crud. Ars. Bry.*  
*Canth. Carbo an. Caustic. Clem.*  
*Dule. Graphit. Hell. Hep. Kali.*  
*Lach. Natr. Natr. mur. Nitr. ac.*  
*Phosph. Ran. bulb. Rhus. Secale*  
*corn. Sep. Sulph.*

—gangrenous: *Arsen. Carbo veg.*  
*Camph. Sec. corn.*

—purulent: *Ant. tart. Ars. Asa fæt.*  
*Calc. Clem. Dule. Hep. Kali bichr.*  
*Lyc. Merc. Natr. Natr. mur. Nitric*  
*ac. Puls. Rhus. Sec. corn. Sep. Sil.*  
*Staph. Sulph. Zinc.*

—humid: *Alum. Ars. Bovista. Carbo*  
*an. Carbo veg. Caust. Clem. Dule.*  
*Graph. Hep. Kali. Lach. Lyc. Nitr.*  
*ac. Petr. Rhus. Selen. Sep. Sil.*  
*Staph. Sulph. Sulph. ac.*

—flat: *Ars. Asa f. Bell. Lach. Lyc.*

*Natr. Nitric ac. Phosph. ac. Selen.*  
*Sep. Sil.*

—corrosive: *Ars. Baryt. Borax. Calc.*  
*Cham. Con. Graphit. Hep. Kali.*  
*Lach. Mercur. Natr. Nitric ac. Pe-*  
*trol. Rhus. Sep. Sil. Staph.*

—yellowish: *Creos. Euphorb. Merc.*  
*Nitr. ac.*

—miliary: *Agar. Ars. Carbo veget.*  
*Graph. Hep. Led. Natr. mur. Nux*  
*vom. Zinc.*

—itching: *Aco. Ant. crud. Ant. tart.*  
*Ars. Bry. Canth. Caustic. Cham.*  
*Clem. Graphit. Ignat. Kali. Lach.*  
*Mercur. Mezer. Nitric ac. Oleand.*  
*Ran. bulb. Rhus. Sep. Sil. Staph.*  
*Sulph. Veratr.*

—coppery: *Arsen. Carbo an. Creos.*  
*Lach. Merc. Rhus. Veratr.*

—nettle-rash: *Aco. Apis. Ars. Bell.*  
*Bry. Calc. c. Caustic. Cepa. Cop.*  
*Dule. Hep. Ipec. Lyc. Natr. mur.*  
*Puls. Rhus. Secale corn. Petr. Sep.*  
*Sulph. Veratr.*

—scurfy: *Alum. Ant. crudum. Bell.*  
*Calc. c. Carbo anim. Carbo veg.*  
*Cic. Con. Dulcam. Graph. Hep.*  
*Lyc. Mercur. Puls. Rhus. Sassap.*  
*Sepic. Sil. Sulph.*

—scaly: *Amm. mur. Ars. Aur. Bell.*  
*Bry. Calc. c. Clem. Dule. Graph.*  
*Led. Lycopod. Mercur. Oleand.*  
*Phosphor. Phosph. ac. Puls. Rhus.*  
*Sep. Sulph.*

—dry: *Bar. Calc. c. Carbo veg. Cupr.*  
*Dule. Graph. Led. Lycop. Magn. c.*  
*Mercur. Phosph. Sep. Sil. Staph.*  
*Veratr.*

—rickly: *Bor. Calc. c. Cham. Graph.*  
*Hep. Merc. Natrum. Nitr. ac. Petr.*  
*Rhus. Sil.*

**HERPES, generally:** *Alumin. Ambr.*  
*Arsen. Bov. Bryon. Calc. c. Carbo*  
*veget. Caustic. Chel. Clem. Chlor.*  
*Conium. Creos. Dule. Fluor. ac.*  
*Graphit. Hep. Kali. Lach. Led. Lyc.*  
*Merc. Natr. Natr. mur. Nitric acid.*



- \* **Oleander.** *Petr. Rhus. Phosph. Sep. Silic. Spig. Staph. Sulph.*
- suppurating: *Dulc. Lycop. Merc. Rhus. Sep. Sil. Sulph.*
- humid: *Bov. Calcar. c. Clem. Con. Graphit. Hep. Lach. Lye. Natr. Nitric ac. Rhus. Sep. Sil. Sulph.*
- spreading: *Ars. Calc. Graph. Lye. Merc. Nitr. Petr. Rhus. Sil. Sulph.*
- furfuraceous: *Ars. Calcar. Dulc. Graphit. Sep. Sil. Sulphur.*
- crusty: *Bar. Bov. Calc. c. Clem. Con. Dulc. Graphit. Lach. Lye. Merc. Rhus. Sep. Sulph.*
- pustulous: *Creos. Mercur. Sulph.*
- ring-shaped: *Natr. Natrum mur. Sep.*
- scaly: *Ars. Clem. Dulcam. Merc. Phosph. Rhus. Sulph.*
- syphilitic: *Aur. Merc. Nitric ac. Thuj.*
- grape-shaped: *Calc. c.*
- dry: *Ars. Bov. Calc. carb. Dulc. Graph. Led. Lye. Merc. Rhus. Sepia. Sil. Sulphur. Veratr.*
- MEASLES:** *Acon. Ars. Bell. Bry. Coff. Dulcam. Iod. Ipec. Mercur. Phosph. Puls. Rhus. Sulph.*
- MILIARIA, white:** *Ars. Bryon. Ipec. Nux vom. Sulph. Valer.*
- of lying-in women: *Bry. Ipec.*
- PIMPLES:** *Ant. crud. Ars. Bry. Calc. c. Canth. Caustic. Chamom. Con. Dulc. Graph. Kali. Merc. Natr. Natrum mur. Nitric ac. Phosph. Puls. Rhus. Sep. Sil. Spong. Staph. Sulphur. Sulph. ac. Thuj. Zinc.*
- PURPLE-RASH:** *Aco. Bell. Coff. Sulph.*
- PUSTULES:** *Ant. crud. Ant. tart. Arn. Ars. Bell. Bryon. Caust. Cic. Clem. Dulcam. Hyosc. Merc. Nitr. ac. Petr. Pulsat. Rhus. Sil. Staphys. Sulph.*
- RASH:** *Acon. Ant. crud. Ant. tart. Arn. Ars. Bell. Bry. Canth. Carbo veg. Causticum. Cham. Coffea. Graph. Ipec. Lach. Merc. Phosphor. ac. Puls. Rhus. Selen. Staph. Sulphur. Veratr.*
- RUBEOLA:** *Acon. Bell. Bry. Coff. Merc. Puls. Rhus.*
- SCARLETRASH:** *Aconit. Bell. Bry. Coff. Dulc. Ipecac. Merc. Phosph. Sulph.*
- suppressed: *Apis. Bry. Phos. Sulphur.*
- SMALL-POX:** *Ant. crud. Antim. Tart. Arn. Ars. Bell. Canthar. Mercur. Puls. Rhus. Sil. Sulph.*
- spurious: *Bell. Merc. Pulsat. Rhus.*
- black: *Ars. Rhus. Sec. corn. Sep. Sil.*
- SPOTS, blue:** *Arn. Ars. Bry. Con. Croc. Lach. Nitric ac. Nux mosch. Nux vom. Op. Phosph. Rhus. Sec. corn. Sulphur. ac.*
- bloody (Petechia): *Arnica. Ars. Bell. Bry. Calc. Conium. Croc. Ferr. Hyosc. Laches. Led. Nitric ac. Nux vomica. Phosph. Puls. Rhus. Ruta. Sec. corn. Sep. Sil. Sulphur. Sulph. ac.*
- brown red: *Cann. Nitr. ac.*
- raised: *Merc.*
- yellow: *Arn. Ars. Conium. Ferr. Iod. Lach. Lycop. Petr. Phosph. Sep. Sulph.*
- greenish: *Arn. Con. Croc. Ruta. Sep.*
- liver-colored: *Ant. crud. Arn. Calc. Carbo veg. Con. Dulc. Ferr. Lye. Merc. Natrum. Nitric ac. Nux vom. Phosph. Sep. Sulph.*
- mottled: *Croc. Thuj.*
- dark-red: *Natr. mur. Thuj.*
- red: *Amm. Arn. Bell. Bry. Calc. Carbo veg. Coccul. Cycl. Dulc. Graph. Kali. Lach. Lye. Magn. Merc. Nitr. ac. Phos. Rhus. Sabad.*

Sep. *Sil. Sulphur. Sulph. ac.*  
 —scarlet-red: *Amm. Bell.*  
 —black: *Crot. Lach. Sec. corn.*  
 —violet: *Veratr.*  
 —white: *Alum. Ars. Phosph. Sep. Sil. Sulph.*  
**VARICELLA:** *Ant. crua. Ant. tart. Bryon. Carbo veg. Ipec. Led. Merc. Pulsat. Rhus. Sep. Sil.*  
**ZONA:** *Ars. Graph. Mercur. Rhus. Sil. Sulph.*

### Excrecences.

**CHILBLAINS:** *Agar. Ant. crud. Arn. Carbo an. Cham. Lycop. Nitr. Petr. Phosph. Puls. Rhus. Sulph. Sulph. ac. Thuj.*  
 —blistered: *Cepa. Nitric ac. Rhus.*  
 —blue-red: *Arn. Puls.*  
 —inflamed: *Cham. Nitric ac. Puls. Sulph.*  
 —itching: *Nitric acid. Nux vom. Sulph.*  
**FUNGUS HÆMATODES:** *Arsen. Calc. Carbo an. Carbo veg. Lach. Lycop. Merc. Nitric acid. Phosph. Sil. Sulph. Thuj.*  
**FUNGUS MEDULLARIS:** *Carbo an. Phosph. Sil.*  
**FUNGUS ARTICULARIS:** *Antim. crud. Ars. Creos. Iod. Lach. Rhus. Sil. Staph. Sulph.*  
**GANGLIA:** *Amm. c. Calc. c. Phos. Sil. Zinc.*  
**MOLES:** *Calc. Carbo veg. Merc. Phosph. Sep. Sil. Sulph. Sulph. ac. Thuj.*  
**NOMA:** *Aur. mur. Creos. Fluor. ac. Iod. Sec. corn.*  
**POLYPI:** *Aur. Calc. Con. Hep. Lycop. Merc. Nitric ac. Phosph. Puls. Sil. Staph. Sulphur. Teucr. Thuj.*  
**STEATOMA:** *Antim. crud. Baryt. Calc. c. Graph. Hep. Nitric ac. Sabin. Sil. Sulph.*  
**SYCOSIC WARTS:** *Calcar. Lycop. Nitric ac. Phosph. ac. Sabina. Thuj.*  
 —horny: *Ant. crud.*

**WARTS:** *Ars. Bar. Bell. Bor. Calc. Caust. Cepa. Dule. Hep. Kali bichr. Lach. Lycop. Natr. Nitr. ac. Petr. Phos. ac. Rhus. Ruta. Sangn. Sep. Sil. Staph. Sulph. Thuj.*  
 —bleeding: *Natr. c. Nitric ac. Sulph. ac. Thuj.*  
 —burning: *Arsen. Petr. Rhus. Thuj.*  
 —suppurating: *Caust. Hep. Sil.*  
 —inflamed: *Calc. Natr. c. Nitr. acid. Rhus. Sil.*  
 —flat: *Calc. c. Dule.*  
 —pedunculated: *Dule. Lycop. Sabin. Thuj.*  
 —horny: *Ant. crud. Natr. carb. Sulph. Thuj.*  
 —small: *Calc. Rhus. Sulph.*  
 —painful: *Calc. c. Nitric acid. Sulph. Thuj.*  
 —split: *Lycop. Nitric ac. Phosph. ac. Thuj.*  
**ERYSIPELAS:** *Acon. Arn. Arsen. Bell. Bry. Calc. c. Camph. Canth. Carbo an. Graph. Hey. Iod. Lach. Merc. Nitric ac. Phos. Puls. Rhus. Sabad. Sep. Sulph.*  
 —vesicular: *Ars. Bell. Canth. Graph. Lach. Phosphor. Puls. Rhus. Sey. Sulph.*  
 —flying: *Bell. Puls. Rhus.*  
 —smooth: *Acon. Amm. Bell. Merc.*  
 —with swelling: *Amm. Apis. Ars. Bar. Bell. Bryon. Calc. Graph. Hep. Lycop. Merc. Nitric acid. Phosph. Rhus. Sulph.*  
**FORMICATION:** *Arn. Bar. Carbo veg. Bell. Kali. Laur. Lycop. Mur. ac. Natrum. Nux vom. Oleand. Phos. ac. Plat. Puls. Rhod. Rhus. Secale corn. Sep. Spig. Staph. Sulph.*  
**FRECKLES:** *Alum. Antim crud. Calc. c. Graph. Lycop. Merc. Natr. Puls. Sep. Sulph.*  
**GANGRENE, humid:** *Ars. China. Hell. Phosph. Sec. corn.*  
 —hot: *Ars. Carbo veg. Sec. corn.*  
 —cold: *Ars. Asa f. Carbo an. Fluor.*

- ac.* Plumb. **Secale corn.** *Sil.* Squill. Sulph.
- HANG-NAILS:** *Calc.* Merc. **Natr. mur.** *Rhus.* **Stann.** Sulphur.
- ITCH:** *Ant. crud.* *Ars.* *Calc.* *Carbo veg.* *Caust.* *Dulcam.* *Graph.* *Lach.* *Mang.* **Merc.** *Phosph.* *ac.* *Psor.* *Se-len.* *Sep.* **Sulph.** *Veratr.*
- greasy: *Caust.* *Merc.*
- ITCHING:** *Acon.* *Alum.* *Ambra.* *Ant. crud.* *Arg.* *Asa f.* *Bar.* *Calad.* *Calc. c.* *Canth.* *Carbo veg.* *Caust.* *Chel.* *Cic.* *Clem.* *Con.* *Cycl.* *Euphorb.* *Ferr.* *Graph.* *Hep.* *Ign.* *Kali.* *Lach.* *Led.* *Lyc.* *Magn.* *mur.* **Merc.** *Mur.* *ac.* *Natr. mur.* *Nux vom.* *Oleander.* *Op.* *Phos.* *Plat.* *Puls.* *Rhod.* *Rhus.* *Ruta.* *Sangu.* *Selen.* *Sep.* *Spig.* *Spong.* *Staph.* **Sulph.** **Sulphur.** *ac.* *Thuja.* *Uil.*
- NUMBNESS:** *Ambr.* *Anac.* *Cham.* *Lach.* *Lycop.* *Nux vom.* *Oleand.* *Phosph.* *Phosph.* *ac.* *Plat.* *Puls.* *Rhus.* *Secale corn.* *Sulph.*
- PAIN,** as if sore. *Alum.* *Arnica.* *Bryon.* *Canth.* *Caust.* *Cic.* *Colech.* *Graph.* *Hep.* *Ign.* *Kali.* *Merc.* *Natr. mur.* *Petr.* *Phosph.* *Puls.* *Rhus.* *Sep.* *Sulph.* *Sulph.* *ac.* *Zinc.*
- PITYRIASIS:** *Ars.* *Merc.* *Oleander.* **Sabad.** *Sulph.*
- PORES,** black: *Graph.* *Natr.* *Nitric ac.* *Sulph.*
- PRICKLING:** *Agar.* *Bellad.* *Croc.* *Mezer.* *Plat.* *Sabad.* *Sulph.* *Zinc.*
- PUS,** bloody: *Ars.* *Asa f.* *Carbo veg.* *Hep.* *Kali.* *Lach.* *Lyc.* *Merc.* *Nitr.* *ac.* *Puls.* *Sil.* *Sulph.* *Sulph.* *ac.*
- brownish: *Carb. veg.* *Con.* *Rhus.* *Sil.*
- thick: *Hep.* *Merc.* *Sil.*
- thin: *Asa fœt.* *Carbo veg.* *Caust.* *Merc.* *Puls.* *Sil.* *Sulph.*
- yellow: *Ars.* *Bryon.* *Calc.* *Carbo veget.* *Caust.* *Cic.* *Hep.* *Lycop.* **Merc.** *Phosphor.* *Puls.* *Sep.* **Sil.** *Staph.* *Sulph.*
- yellow-green: *Sil.*
- gray: *Caust.* *Lyc.* *Sil.*
- greenish: *Asa f.* *Caustic.* **Merc.** *Puls.* *Rhus.* *Sil.*
- ichorous: *Ars.* *Asa fœt.* *Carbo veg.* *Chin.* *Graph.* *Merc.* *Nitric ac.* *Phos.* *Rhus.* *Sangu.* *Sil.*
- with mites: *Sabad.* *Sil.*
- copious: *Arsen.* *Asa fœt.* *Canth.* *Calc.* **Merc.** *Puls.* *Rhus.* *Sep.* *Sil.*
- sour-smelling: *Hep.*
- acrid: *Ars.* *Caustic.* *Clem.* **Merc.** *Nitric ac.* *Rhus.* *Sep.* *Sil.*
- fetid: *Ars.* *Asa fœt.* *Carbo veg.* *Chin.* *Graph.* *Hep.* *Lach.* *Lyc.* **Merc.** *Nitric ac.* **Sil.** *Sulph.* *Sec. corn.*
- watery: *Ars.* *Asa fœt.* *Caustic.* **Merc.** *Nitric ac.* *Ran. sc.* *Rhus.* *Sil.* *Sulph.*
- white like milk: *Calc.* *Hell.* *Lyc.* *Puls.* *Sulph.*
- too little: *Calc.* *Dulcam.* *Hep.* **Lach.** **Merc.** *Phos.* *Phumb.* *Sil.*
- viscous: *Arsen.* *Con.* *Mercur.* *Viola tr.*
- SKIN,** dry: *Aconit.* *Amm.* *Arn.* *Ars.* *Bell.* *Bry.* *Calc.* *carb.* *Cham.* *China.* *Colech.* *Dulc.* *Graphit.* *Hep.* **Hyose.** **Iod.** *Kali.* *Led.* *Lyc.* *Merc.* *Natrum.* *Nitric ac.* *Nux mosch.* *Op.* **Phosph.** *Phosph.* *ac.* *Puls.* *Rhus.* **Sec. corn.** *Seneg.* *Squill.* *Sil.* *Staph.* *Sulph.* *Verb.*
- hard: *Ant. crud.* *Arsen.* *Dulcam.* *Graph.* *Lach.* *Phosph.* *Rhus.* *Sep.* *Sil.*
- rough: *Apis.* *Bellad.* *Calc. c.* *Iod.* *Merc.* *Natr.* *Rhus.* *Sep.* *Sulph.*
- wrinkled: *Ambr.* *Ant. crud.* *Calc. c.* *Camphor.* *Cupr.* *Hell.* **Iod.** *Lyc.* **Phosph.** *ac.* *Rhus.* **Sec. corn.** *Sep.* *Spig.* *Veratr.*
- relaxed: *Calc.* *carb.* *Caps.* *Chin.* *Coccul.* *Cuprum.* *Ferr.* *Graphit.* *Hell.* **Iod.** *Lach.* *Lyc.* *Merc.* *Natr.* **Sec. corn.** *Sulphur.* *Veratr.*

- sensitive: *Agar. Ars. Asa f. Bell. Calc. Carbo an. Carbo veg. Caust. Chin. Ferr. Hep. Ign. Lach. Led. Lyc. Natr. mur. Nitric ac. Nux vom. Petr. Phosph. ac. Puls. Ran. bulb. Rhus. Sil. Spig. Thuj. Veratr.*
- to contact: *Bell. Bryon. Camph. Colch. Nux vom. Puls. Spig.*
- humid air: *Amm. carb. Calc. c. Carbo veg. Dulcam. N. mosch. Puls. Rhod. Rhus.*
- to cold air: *Amm. c. Calc. c. Carbo veg. Caust. Lyc. Nux vom. Rhod. Sec. corn. Sep.*
- to warm air: *Calcar. Puls. Sep.*
- STITCHES: *Acon. Arn. Arsen. Bar. Bell. Bry. Calc. Canth. Caust. Coccul. Con. Dulcam. Graph. Hell. Ign. Lycopod. Merc. Nitric ac. Nux vom. Oleand. Puls. Ran. sc. Rhus. Sabad. Sep. Spong. Staphys. Sulph. Tar. Thuj. viola tr.*
- SWELLING IN GENERAL: *Ant. crud. Apis. Arn. Ars. Aur. mur. Bell. Bry. Calc. c. Calc. ph. Canth. Chin. Colehic. Con. Dig. Dulc. Ferr. Hell. Iodine. Kali. Lach. Led. Lyc. Merc. Nitric ac. Op. Phos. Plumb. Puls. Rhodod. Rhus. Ruta. Samb. Sep. Sil. Sulph.*
- pale: *Arn. Bry. Calc. Chin. Ferr. Lach. Lyc. Merc. Puls. Rhus. Sep.*
- inflamed: *Acon. Ars. Asa f. Bell. Bry. Caustic. Hep. Lach. Merc. Nitric ac. Puls. Rhus. Ruta. Sil. Sulph.*
- hard: *Arn. Ars. Asa f. Bell. Bry. Carbo an. Caustic. Con. Hep. Lach. Phosph. Puls. Rhus. Sabin. Stront. Sulph.*
- cold: *Ars. Chin. Con. Lach. Puls. Sec. corn.*
- erysipelalous: *Apis. Bell. Merc. Rhus.*
- dropsical: *Ant. crud. Apis. Ars. Aurum mur. Bell. Bry. Canth. Cepa. China. Con. Dig. Dule. Ferr.*

*Hell. Iod. Kali. Led. Lyc. Mercur. Nitric ac. Phosph. Puls. Rhod. Rhus. Samb. Squill. Seneg. Sep. Sulph.*

### Ulcers.

- IN GENERAL: *Ant. crud. Arsen. Asa fet. Aur. Bell. Bryon. Calc. c. Calc. ph. Carbo an. Carbo veg. Caust. Cham. Con. Creos. Hep. Iod. Kali. Lach. Lyc. Merc. Natr. Nitric ac. Nux vom. Petr. Phosph. Ph. ac. Puls. Rhus. Ruta. Sangn. Sec. corn. Sassap. Sep. Sil. Staph. Sulph. Thuj.*
- ULCERS, blueish: *Ars. Aur. Con. Hep. Lach. Merc. Sec. corn.*
- bleed, liable to: *Ars. Asa f. Carbo veg. Con. Hep. Lach. Lyc. Merc. Nitric ac. Phosph. Puls. Sil. Sulph. Sulph. ac.*
- burning: *Ars. Asa f. Bell. Carbo veg. Caust. Clem. Hep. Lyc. Merc. Mur. acid. Nux vom. Nitric acid. Phosph. Puls. Rhus. Sil. Sulph.*
- fistulous: *Antim. crud. Apis. Asa f. Bell. Calc. c. Caust. Con. Lyc. Merc. Nitric acid. Phosph. Puls. Sil. Sulph.*
- flat: *Ars. Lach. Sil.*
- with swelling: *Ars. Bell. Bry. Hep. Kali. Merc. Nitric ac. Puls. Rhus. Sep. Sil. Sulph.*
- hard swelling: *Ars. Asa fet. Bell. Calc. Con. Hep. Lach. Lyc. Merc. Puls. Sangn. Sil.*
- margins everted: *Ars. Asa f. Hep. Merc. Petr. Rhus. Sil. Sulph.*
- itching: *Ant. tart. Ars. Caustic. Chin. Hep. Lyc. Nitric ac. Phosph. ac. Puls. Rhus. Sil. Sulph.*
- cancerous: *Ars. Ast. Carb. an. Carbo veg. Con. Creos. Graph. Hep. Lach. Mercur. Rhus. Sil. Sulph.*
- mercurial: *Alum. Asa fet. Carb. veg. Fluor. ac. Hepar. Lach. Lycop. Mezer. Nitric ac. Sassap. Sulph. Thuj.*



- salt-rheum, like: **Ars.** Graph. *Lyc.*  
*Sep.* Sil. Sulph.
  - painful: **Arn.** **Ars.** *Asa fæt.* **Carbo**  
**veg.** *Caust.* Cham. Con. Creos.  
**Graph.** *Hep.* Lach. *Lycop.* **Merc.**  
Nitric ac. Petr. Phosph. Phos. ac.  
Puls. *Sabin.* *Sep.* Sil. Sulph.  
Veratr.
  - painless: **Ars.** Bellad. Carbo an.  
Carbo veg. Cic. *Con.* Hyosc. Lach.  
*Lyc.* *Oleand.* Phosph. **Phosph.** ac.  
Puls. **Sec. corn.** Sulph.
  - with ash-colored base: **Mercur.**  
Nitric ac. Thuja.
  - spongy: **Ars.** Carbo an. *Carbo veg.*  
Clem. Lach. *Merc.* Petr. Phosph.  
*Sep.* Sil. Sulphur. Thuja.
  - lardaceous: Hep. **Mercur.** Nitric ac.
  - stitches in ulcers: **Ars.** Bell. *Bry.*  
Carbo veg. Graph. **Hep.** *Lyc.* **Mer-**  
cur. Nitric acid. Petr. *Pulsat.* Sil.  
*Sulph.*
  - syphilitic: *Aur.* Carbo veg. *Fluor.*  
acid. Kali bichr. Nitric acid. **Merc.**  
Phos. ac. *Sangu.* Thuja.
  - deep: *Asa f.* Calc. c. *Con.* Hep.  
Lach. *Lyc.* **Merc.** Nitric ac. *Puls.*  
Sil. Sulph.
  - insensible: **Ars.** Calc. carb. Carbo  
veg. **Con.** Iodine. Lach. Laur. *Lyc.*  
Phosph. ac. *Sec. corn.* Sil.
  - unhealthy: Calc. c. Cham. *Chel.*  
**Hep.** Lach. **Mercur.** Petr. *Rhus.*  
Sil. *Staph.*
  - ulcerative pain: *Asa f.* Calc. Graph.  
Phos. Puls. *Rhus.* Sil. *Sulph.* Zinc.
  - suppurating: *Arsen.* *Asa fæt.* Calc.  
c. Canthar. *Carbo veg.* Caustic.  
Con. Creos. Graph. **Hep.** *Lyc.*  
**Merc.** Mur. ac. Nitric ac. Puls.  
*Rhus.* Ruta. *Sec. corn.* *Sep.* Sil.  
*Staphys.* Sulph. Sulph. ac.
  - with proud flesh: *Ars.* Carbo an.  
Cham. Creos. Graph. Hep. Lach.  
**Merc.** Petr. *Sep.* Sil. *Sulph.*
  - painfully sore: **Ars.** Bell. Calcar.  
Graph. **Hep.** *Merc.* Nux vom. Puls.  
*Sep.* *Sulph.*
  - shaggy: Lach. *Merc.* Phosph. ac.  
Thuja.
- VARICES:** Ant. tart. **Arn.** **Ars.**  
Carbo veg. Caust. *Ferrum.* Graph.  
Lach. *Lyc.* Natrum mur. *Pulsat.*  
Spig. *Sulph.* Thuja.
- VEINS,** swelling of: **Arn.** Bell. *Chin.*  
Croc. **Ferr.** Graph. Hyosc. **Phos.**  
*Pulsat.* *Sulph.* Thuja.
- WOUNDS:** **Arn.** Carbo veget. Hep.  
Lach. *Merc.* Phosphor. *Puls.* *Rhus.*  
*Staph.* Sulphur. Sulph. ac. Zinc.
- bleeding: **Arn.** *Laches.* Phosph.  
Sulph. Sulph. ac.
  - cut: *Arn.* **Staph.** Sulph. ac.
  - contused: **Arn.** *Con.* Hepar. *Rhus.*  
Ruta. Sulph. ac.
  - punctured: *Carbo veget.* Cic. *Con.*  
Hep. Nitric ac.
  - by insects: Aconit. Apis. **Arn.**  
Bell. Calad. Lach. *Merc.* Seneg.
  - burns: Aco. **Arn.** *Ars.* Canthar.  
*Carbo veg.* Caustic. Creos. Sulph.  
ac. Urtic. ur.

## XXIX. SLEEP, DREAMS.

- CLAIRVOYANT STATE:** Aconit.  
*Op.* Phosph. Sil. Sulph.
- DROWSINESS,** in the evening: Ant.  
tart. **Ars.** *Asa f.* Bar. Bell. Bov.  
Calc. c. China. Cin. **Con.** *Croc.*  
Crotal. Ign. Kali. Lach. Laur. Natr.
- mur. N. vom. Phosph. Ph. ac. Puls.  
*Rhus.* Selen. Sil. Valer.
- in the morning: Ant. crudum. **Arn.**  
*Asa f.* Calc. c. Caust. **Con.** Graph.  
Kali. *Merc.* Natr. Natr. mur. Nux  
vom. Phosphor. Phosph. ac. *Puls.*

- Rhus. Sep. Sil. Spig. Stram. Sulph.  
 —in the afternoon: *Agar. Canthar. Caust. Chin. Coff. Croc. Graphit. Guaj. Ignat. Kali. Lach. Laur. Lycop. Mur. ac. Natr. Natr. mur. N. vom. Ol. an. Phosph. Pulsat. Rhus. Sep. Sil. Staph. Sulph. Thuj. Veratr. Viol. tr. Zinc.*  
 —in the day-time: *Agar. Ambr. Amm. carb. Anac. Ant. crud. Ant. tart. Ars. Asa f. Aur. Bell. Bry. Calc. c. Canthar. Carbo veg. Caust. Cham. China. Coccul. Con. Croc. Dulc. Ferr. Gent. Graph. Hell. Ign. Kali. Lact. Laur. Led. Lyc. Mercur. Mosch. Natr. Natr. mur. Nitr. ac. N. mosch. N. vom. Op. Phosph. Phosphor. ac. Pulsat. Ran. bulb. Rheum. Rhus. Sabad. Selen. Sep. Sil. Stram. Sulph. Tart. Veratrum. Viola tr.*  
 —in the forenoon: *Agar. Ant. crud. Ant. tart. Cannabis. Carbo veget. Fluor. ac. Graphit. Kali. Laches. Mosch. Natrum. Sabad. Sassap. Sepiæ. Sulph.*  
 —excessive: *Ant. tart. Coff. Croc. N. mosch. Op. Phosph. ac.*  
**FALLING ASLEEP TOO LATE:**  
*Alum. Anac. Ant. tart. Ars. Bellad. Bry. Calad. Calc. c. Carbo an Carbo veg. Caust. Chin. Creos. Graphit. Guaj. Ignat. Lach. Led. Lyc. Merc. Natrum carb. Natr. mur. N. vom. Petr. Phosphor. Puls. Rhus. Selen. Sep. Sil. Spig. Stann. Sulph.*

### Positions in Sleep.

- ARMS ABOVE THE HEAD:**  
*Calc. c. N. vom. Plat. Puls. Veratr.*  
**ON THE STOMACH:** *Bell. Coccul. Ign. Stram.*  
**LEGS STRETCHED:** *Bellad. Cham. Puls.*  
 —drawn up: *Carbo veg. Cham. Plat. Puls.*

- —only one: *Stann.*  
**HAND UNDER THE OCCIPUT:**  
*Ign.*  
 —under the head: *Antim. tart. Ars. N. vom. Pulsat. Spigel. Viol. od.*  
**BOTH HANDS UNDER THE OCCIPUT:** *Ambr.*  
**KNEES SPREAD:** *Cham. M. arct. Plat. Viol. od.*  
**HEAD DRAWN BACK:** *Bell. Cina. Hell. Hyosc. Ign.*  
 —inclined forward: *Cic. Puls. Staph. Viol. od.*  
 —stooping: *Arn. Spong.*  
 —toward the back: *Ambr. Ant. tart. Ars. Bry. Calc. c. China. Cic. Ferr. Ign. Lyc. Nux vom. Phosph. Puls. Rhus. Stram. Sulph.*  
 —on one side: *Par. Merc. Natr. Nux vom. Phosph. Spigel. Sulph.*  
 —to left side: *Lyc. Natr. carb. Phosph.*  
 —to right side: *Merc. Phosph.*  
**SITTING:** *Acon. Ars. Lyc. Puls. Sulph.*  
 —————  
**SLEEP, with nightmare:** *Calcar. Caust. Puls. Sulph.*  
 —with starting up: *Ars. Bell. Cham. Cina. Coff. Graphit. Ign. Ipecac. Kali. Lycop. Op. Samb. Sulph.*  
 —with screaming: *Antim. tart. Bell. Cham. Rheum. Zinc.*  
 —with eyes half open: *Cin. Ipec. Op.*  
 —stupid: *Ant. tart. Bell. Calad. Calc. c. Camphor. Cic. Con. Croc. Graph. Ign. Led. N. mosch. Nux vom. Op. Phosph. Puls. Sec. corn. Spig. Valer.*  
 —with throwing off the cover: *Cham. Con. Puls.*  
 —sound: *Ant. crud. Antim. tart. Ars. Bell. Camph. Cic. Croc. Ign. Led. Mosch. N. mosch. Op. Phosphor. ac. Puls. Sec. corn. Selen. Stram. Veratr.*  
 —with grasping at flocks: *Ant. tart. Ars. Hyosc.*

—early: *Anac. Ant. tart. Asa f. Calc. Caust. Con. Croc. Graph. Ignat. Kali. Laur. Lyc. Merc. Natr. N. vom. Phosphor. Phosph. ac. Puls. Sep. Sil. Sulph. Veratr.*

—settling down in bed: *Muriat. acid.*

—tossing about: *Arsen. Bell. Cham. Cin. Hep. Laches. Rheum. Rhus.*

—too long: *Arn. Bellad. Calc. Carbo veget. Coccul. Hyosc. Kali. Ign. Merc. N. vom. Phos. Phosph. ac. Plat. Sep. Verat.*

—too light: *Anac. Ars. Bry. Carbo veg. Chin. Ferr. Ignat. Merc. N. vom. Ol. an. Selen. Sil.*

—with open mouth: *Cin. Merc. Rhus.*

—with somnambulism: *Bryon. Phos. Sulph.*

—with talking: *Alum. Arnica. Bell. Carbo an. Cham. Magn. c. Nux vom. Puls. Rhus. Sil. Sulph.*

—slumber-like: *Graph.*

—with snoring: *Camph. Cham. Chin. Dule. Fluor. ac. Graph. Hep. Op. Sil. Sulph. Stram.*

—loud talking: *N. vom.*

—with moaning: *Alum. Cham. Ign. Merc. Op.*

—with involuntary stool: *Arnic.*

—unrefreshing: *Aeon. Alum. Ambr. Ant. tart. Bellad. Bry. Calc. Cam. Carbo veg. Caust. Chel. Chin. Cic. Con. Croc. Ferr. Graph. Hep. Ign. Kali. Lach. Lyc. Magn. mur. Merc. Natr. Natr. mur. Nitric ac. N. vom. Op. Petr. Phosph. Phosph. acid. Puls. Rhus. Secale corn. Selen. Sil. Spigel. Staphys. Sulph. Viola tric.*

—restless: *Agn. Alum. Antim. tart. Ars. Asa f. Aur. Bar. Bell. Bor. Bry. Calc. Cane. Cam. Caustic. Cina. Cham. China. Coccul. Coff. Coloc. Creos. Daph. Dig. Dulcam. Ferr. Graph. Hep. Ign. Kali. Lach. Lyc. Mang. Merc. Mosch. Mur. ac. Natr. Nitric ac. Nux vom. Petr. Phosph. Puls. Rat. Rheum. Rhod. Rhus. Sa-*

*bad. Sec. corn. Sep. Sil. Sulphur. Tereb. Thuj. Veratr. Viola tr.*

—interrupted: *Ars. Cina. Coccul. Ign. Kali. Merc. Pulsat. Rhus. Sulph.*

**SLEEPLESSNESS:** *Aeon. Ambra. Anac. Ars. Bar. Bell. Bry. Calc. c. Camph. Cann. Caust. Cham. Chin. Cin. Coff. Con. Creos. Daph. Dig. Dule. Ferr. Fluor. ac. Graph. Hep. Hydr. ac. Hyosc. Ign. Kali. Lach. Led. Lycop. Merc. Mosch. Natr. Nux vom. Op. Oleand. Phosphor. Puls. Rhod. Rhus. Sangn. Selen. Sep. Sil. Squill. Sulph. Sulph. ac. Thuj. Valer. Verat. Vinc.*

—before midnight: *Ars. Bellad. Bry. Calc. c. Carbo anim. Carbo veget. Chin. Con. Cycl. Graphit. Ign. Kali. Laches. Lyc. Merc. Natr. Nitric acid. Phosphor. Pulsat. Rhus. Selen. Sep. Sil. Spig. Staph. Sulph. Valer.*

—after midnight: *Ars. Asa foet. Aur. Capsic. Coffea. Hep. Hyosc. Kali. Lach. Lyc. Merc. Natrum. Nitric ac. Nux vom. Plat. Pulsat. Rhodod. Rhus. Samb. Sep. Sil. Sulph. ac. Thuj.*

**SOPOR:** *Agn. Ant. crud. Ant. tart. Arn. Bar. Bell. Brom. Camph. Cic. Con. Croc. Graphit. Hell. Ign. Kali. Lact. Laur. Merc. Mosch. N. mosch. Op. Phosph. ac. Plumab. Puls. Sec. corn. Veratr. Vit.*

**WAKING, too early:** *Ars. Asa foet. Bryon. Calc. c. Coff. Croc. Dule. Hep. Ign. Kali. Lyc. Magn. Mur. ac. Natr. carbon. N. vom. Phosph. ac. Ran. bulb. Rhod. Sep. Sil.*

—frequent: *Ambra. Ant. crud. Arn. Ars. Bell. Bism. Calc. c. Cam. Carbo anim. Caust. Cham. Chin. Cic. Coff. Dig. Fluor. ac. Graph. Hep. Kali. Lyc. Mang. Merc. Nitric ac. Nux vom. Phell. Phosph. Pulsat. Rhus. Ruta. Samb. Selen. Sep. Sil. Staph. Sulphur. Sulph. ac. Tereb. Teucrium. Zinc.*

- difficult: *Antim. tart. Con. Nitric ac. Op. Rhus.*
- too late: *Arn. Calc. Caustic. China. Con. Graph. Kali. Lach. Laur. Merc. Natr. carb. Nux vom. Olean. Phosph. Phosph. ac. Pulsat. Sep. Sil. Sulph.*
- YAWNING:** *Ant. tart. Ars. Bellad. Bry. Calc. c. Caust. Chamom. Cin. Coccul. Creos. Croc. Ferr. Hell. Ign. Kali. Laur. Lyc. Mur. ac. Natr. Natr. mur. N. vom. Op. Phos. Puls. Rhus. Sep. Sil. Stann. Staph. Sulph. Veratr.*
- with stretching: *Ars. Calc. c. Caust. Cham. Ign. Ipec. Nur vom. Puls. Rhus. Spongia. Staph. Valer.*
- spasmodic: *Ign. Plat. Rhus.*

### Dreams.

- IN GENERAL:** *Acon. Alum. Ambra. Ant. tart. Arn. Bellad. Bry. Calc. Caps. Carbo veget. Cham. Chin. Cic. Con. Croc. Graph. Hell. Hep. Ignat. Kali. Lach. Laur. Lyc. M. arct. Magn. Mang. Merc. Natrum. Natr. mur. Nitric ac. N. vom. Op. Par. Phosphor. Phos. ac. Puls. Ran. sc. Rhus. Sabad. Sec. corn. Sep. Sil. Stann. Staph. Stram. Sulph. Thuja. Valer. Vit.*
- ANXIOUS:** *Acon. Ambr. Anac. Arn. Ars. Aur. Bar. Bellad. Calc. c. Cann. Carbo veg. Caust. Chamom. Chin. Con. Creos. Fluor. acid. Graphit. Hep. Iod. Ign. Kali. Lyc. Mann. carb. Merc. Natr. Natrum mur. N. vom. Op. Phosph. Psor. Puls. Rhus. Sassap. Sep. Stram. Sulphur. Teucr. Thuja. Veratr.*
- DREAMS, of thieves:** *Aur. Magn. m. Merc. Veratr.*
- of falling: *Bell. Digit. Ignat. Merc. Phosph. ac. Thuja.*
  - into water: *Ferr. Magn. c.*
  - of fire: *Alum. Anac. Antim. tart.*

- Calc. carb. Hep. Plagn. Magn. mur. Phos. Rhus. Spig.*
- of war: *Hyosc. Magn. carb. Thuja.*
- of animals: *Arn. Hyosc. Nur vom.*
- of wild animals: *Nur vom.*
- of death: *Coccul. Kali carb. Nux vom. Plat.*
- of dead bodies: *Anac. Ars. Aur. Brom. Calc. c. Graphit. Iod. Kali. Magn. carb. Phos. ac. Sulph. ac. Thuja.*
- of poisoning: *Natr. mur.*
- of imprisonment: *Clem.*
- of dead persons: *Natr. carb. Sulph. acid.*
- of water: *Amm. mur. Arsen. Ferr. Graphit. Ign. Magn. carb. Merc. Natr. Nitr. Sil.*
- of quarreling: *Arn. Calcar. Cham. Magn. carb. N. vom. Phosph. Puls. Selen. Stann.*
- vexing: *Ambra. Ars. Asar. Caust. Cham. Con. Hep. Ign. Natr. Nux vom. Phell. Phosph. Rhus. Staph. Sulph.*
- pleasant: *Agar. Alum. Ant. crud. Calc. c. Carbo veget. Coccul. Coff. Croc. Graphit. Ignat. Kali. Lach. Mercur. Natr. Natr. mur. Nur vom. Op. Phosph. Puls. Sep. Sil. Staph. Sulph. Viol. tr.*
- of flowers: *Natr. c.*
- of fine country: *Ol. an.*
- of gold: *Cycl. Magn. c.*
- of journeys: *Crot. Lach. Magn. carb. Op.*
- of dancing: *Magn. carb.*
- continued: *Calc. carb. Ign. Natr. c. Puls.*
- nauseous: *Amm. carb. Natr. mur. Zinc.*
- that can be remembered: *Bellad. Natr. mur. Phosph.*
- frightful: *Calcar. c. China. Graph. Kali. Lyc. Nur vom. Op. Phosph. Puls.*
- lascivious: *Antim. crud. Calc. c. Canth. Chel. Con. Graphit. Ignat.*



- Kali. Lach. Lyc. Merc. Natr. Natr. mur. Nux vom. Oleand. Op. Plat. Plumbum. Puls. Sep. Staph. Thuj. Vine. Viol. tr.*
- indifferent: *Chin. Ign. Nux vom. Puls. Stront. Sulph.*
- half-awake: *Op.*
- vivid: *Anac. Arn. Ars. Bell. Calc. c. Canthar. Cham. Cic. Coffea. Con. Fluor. ac. Ignat. Lach. Lyc. Magn. carb. Mang. Merc. Natr. Natrum mur. Petr. Phosphor. Pulsat. Rhus. Ruta. Sil. Squill. Sulph.*
- merry: *Caust. Laur. Op.*
- fanciful: *Calc. c. Kali. Lach. Natr. Nitric ac.*
- wandering: *Calc. c. Kali. Lyc. Natr. Natr. mur. Nux vom. Sulph.*
- sad: *Ign. Laur. Natr. c. Op. Phos. Zinc.*
- that cannot be remembered: *Aur. Bellad. Cic. Hell. Ign. Iod. Lach. Lyc. Merc. Natr. Natr. mur. Ol. an. Plat. Rhus. Samb. Selen. Spig. Sulph. Tar. Veratr.*
- confused: *Bar. Calc. c. Chin. Cic. Crot. Hell. Led. M. austr. Natr. Petr. Phos. Puls. Spig. Stann.*
- wakeful: *Acon. Arn. Bell. Cham. Lach. Merc. Nux vom. Op. Phos. ac. Stram.*

### XXX. GENERAL SYMPTOMS.

(All the pains which belong exclusively or more particularly to a certain part should be looked for under that head.)

- AGGRAVATION, in the afternoon:
- Agar. Alum. Ant. crud. Asa f. Bell. Bism. Calc. Canth. Carbo veget. Caustic. Cic. Coccul. Coloc. Con. Creos. Ferr. Hell. Ign. Lach. Laur. Lyc. Mosch. Nitr. Nitric ac. Nux vom. Op. Phosph. Puls. Ruta. Selen. Seneg. Sil. Spig. Staph. Teucr. Thuj. Veratr. Zinc.*
- in the open air: *Agar. Ambr. Arn. Bar. Calc. Camph. Carb. an. Cham. Chin. Coccul. Coff. Ferr. Guaj. Ign. Lach. Lyc. M. austr. Mur. ac. Natr. Nitric ac. N. mosch. N. vom. Op. Phosph. ac. Rhus. Selen. Sil. Spig. Staph. Stram. Sulph. ac. Thuj. Viol. tr.*
- when alone: *Ars. Kali. Lyc. Stram.*
- before breakfast: *Amm. mur. Bar. Calc. Cann. Caustic. Croc. Ferr. Ign. Iod. Kali. Laches. Lyc. Nux vom. Plat. Plumb. Rhus. Sabad. Spigel. Staph. Valer. Verb.*
- by changing one's position: *Caps. Carbo veg. Ferr. Lach. Lycopod. Phosph. Puls. Rhus.*
- when chewing: *Alum. Amm. Amm. mur. Bell. Bry. Calc. China. Euphr. Hep. Ignat. Mang. Men. Natr. mur. Nitric ac. Oleand. Phosph. Phosph. ac. Puls. Rhus. Sabin. Sep. Staph. Sulph. ac. Thuj. Zinc.*
- in the cold: *Aco. Amm. Arn. Arg. Ars. Aur. Bar. Bellad. Camph. Carbo veg. Caust. Cic. Con. Dule. Graph. Hell. Hep. Hyoscyam. Ign. Kali. Magn. Magn. muriat. Mosch. Nux vom. Petr. Phos. Rhod. Rhus. Sabad. Sep. Sil. Spong. Squill. Stront. Sulphur. ac. Veratr.*
- in company: *Bar. Hell. Lyc. Natr. Phosph. Plumbum. Sep. Stann.*
- by contact: *Acon. Ang. Arn. Ars. Bell. Bov. Bry. Cam. Carbo veg. Cham. Chel. Cin. Coccul. Colch. Cupr. Ferrum. Graph. Hell. Hep. Hyosc. Led. Lyc. Magn. mur. Merc. Mezer. Nitric ac. Nux vom. Oleand.*

- Phosph. acid.* Pulsat. **Ran. bulb.**  
*Rhodod.* Rhus. **Sabin.** *Sec. corn.*  
*Sep. Sil.* **Spig.** Staph. *Stram.* Sulph.  
*Tart. emet.* Veratr.
- gentle contact: **Bell.** *China.* **Nux vom.**
- by crying: Arn. **Bell.** *Cham.* Cupr.  
 Lach. Puls. *Veratr.*
- by a draught of air: *Bellad.* Calc.  
*Cham. Chin.* Hep. Ign. Kali. Led.  
 Natr. Nux vom. Puls. Rhus. Selen.  
*Sep. Silic.* Sulph.
- drinking coffee: Canth. **Caustic.**  
**Cham.** Coccul. Ign. Lyc. Merc. Nux vom.  
 Pulsat. Rhus. *Sulph.*
- cold liquids: Ant. crud. Ars.  
 Caustic. Con. **Graph.** Ign. Lyc.  
 Mang. Merc. *Nux mosch.* Nux vom.  
 Rhod. Rhus. *Sulph. Veratr.*
- after drinking: Ars. **Bry.** *Cham.*  
*China.* Coccul. Coloc. Con. *Croc.*  
 Dros. Ferr. Hep. Ign. Merc. Mezer.  
 Natr. *Natr. mur.* *Nux vom.* Puls.  
 Rhus. *Ruta.* Squill. *Sep. Sil.* Sulph.  
*Tart. emet.* *Veratr.*
- while drinking: Anac. *Arsen.* Bell.  
 Bry. Canth. Colch. *Hyosc.* Ign.  
 Iod. Lach. Mercur. *Phosph.* Rhus.  
*Sep. Sulph.* *Stram.*
- drinking beer: Ferr. Lyc. *N. vom.*  
 Puls. Rhus. *Stram.* Sulph. Verat.
- drinking tea: Ferr. Selen.
- warm liquids: Ambr. Anac. Bell.  
 Bryon. Carbo veg. *Cham.* Hell.  
 Kali. Mezer. *Phosphor.* Pulsat.  
*Spig.* Sulph. ac.
- cold water: Arsen. Bell. Canth.  
*Croc.* Ign. Lyc. Natrum. *N. vom.*  
*Phos. ac.* Rhod. Rhus. Sulph.  
 Sulph. ac. Veratrum.
- wine: Ant. crud. Ars. Calc. Coff.  
 Lach. *Lyc.* Natr. Natr. mur. Nux vom.  
**Op.** *Ran. bulb.* Selen. *Sil.*  
*Zinc*
- vinegar: Ant. crud. Ars. Ferr.  
 Lach. Nux vom. *Sulph.*
- before eating: Ambr. Calc. Chel.
- Croc.* Ferr. **Graph.** Ign. Iod. Kali.  
 Lach. *Laur.* Natr. *Phosph.* Plumb.  
 Puls. Rhus. *Sabad.* *Sulph.*
- while eating: Amm. Ars. Bar. Bry.  
 Calc. Carbo an. Carbo veg. Cham.  
 Coccul. Graph. Hep. Kali. Lach.  
 Lycop. M. aret. Natr. *Natr. mur.*  
*Nitric ac.* Phosph. Puls. Rhod. *Sep.*  
*Thuj.* Veratr.
- after eating: *Ammon. mur.* Anac.  
 Ars. Asa f. Bryon. Calc. Carb. veg.  
 Caust. Cham. *China.* Con. *Graph.*  
 Hyosc. Iod. Kali. Lycopod. Merc.  
*Mur. ac.* Natr. *Natrum mur.* *Nitric acid.*  
 Nux vom. *Posph.* Pulsat. Rhus. *Sep. Sil.*  
 Sulph. Sulph. ac. Veratrum. Zinc.
- by eating bread: Bry. China. Kali.  
 Natrum mur. Nux vom. Puls. Rhus.  
*Sep. Staphysag.* *Sulph.* Zinc.
- eggs: Ferr.
- fat: Ars. Carbo veget. *Cycl.*  
 Ferr. Hell. Magn. mur. *Nitric ac.*  
 N. vom. Pulsat. *Sep. Sulph.* Tar. Thuj.
- fish: Kali. Plumb.
- smoked meat: Calc. Sil.
- vegetables: Ars. Bryon. Hell.  
 Lyc. Natr. Puls. Verat.
- honey: Natr.
- peas and beans: Bry. Calc. Lyc.  
 Natr. mur. Petr. Puls.
- meat: Carb. an. Ferr. Puls.  
 Staph. Sulph.
- oysters: Lyc.
- pastry: Carbo veg. Puls.
- roots: Calc. Lyc. Puls.
- onions: Natr. Thuj.
- potatoes: Veratr.
- farinaceous food: Sulph.
- milk: Ambr. Arsen. Bryon. Calc.  
 Cham. China. Con. Ign. Kali. Lyc.  
 Natr. Natr. mur. *Nitr. ac.* N. vom. Samb. *Sep.* Spong.  
 Sulph.
- fruit: Arsen. Bry. Carbo veg. Chin.  
 Magn. mur. Puls. Rhod. Selen. Veratr.

- — turnips: *Puls.*
- — salt food: *Carbo veg.* *Lyc.*
- — sour food: *Ant. crud.* *Ars.* *Ferr.*  
*Natr.* *Nux vom.* *Sep.* *Sulph.*
- — sweet: *Cham.* *Ignat.* *Natr.* *Merc.*
- by eructations: *Cann.* *Chamom.*  
*Coccul.* *Kali.* *Laches.* *Phosph.*  
*Plumb.* *Rhus.* *Sabin.* *Sep.*
- in the evening: *Ambr.* *Amm.* *Ant.*  
*crud.* *Arn.* *Ars.* *Asa f.* ***Bell.*** ***Bry.***  
*Calad.* *Calcar.* *Caps.* *Carbo veg.*  
*Caust.* *Coff.* *Colch.* *Croc.* *Dulcam.*  
*Euphr.* *Ferr.* ***Hell.*** *Hyosc.* *Ignat.*  
*Iod.* *Lach.* *Lycop.* *M. austr.* *Magn.*  
*Men.* *Merc.* *Nitr. ac.* *Petr.* *Phosph.*  
***Plat.*** *Puls.* *Ran. sc.* *Rhod.* *Rhus.*  
*Selen.* *Sep.* *Sil.* *Sulphur.* *Sulph. ac.*  
*Tart. emet.* *Thuj.* *Zinc.*
- during expirations: *Bry.* *Caustic.*  
*Colchic.* ***Dig.*** *Ign.* *Iod.* *Oleand.*  
*Puls.* *Sep.* *Spigel.* *Veratr.* *Viol. od.*
- in the fall: *Chin.* *Colchicum.* ***Rhus.***  
*Veratr.*
- in a feather-bed: *Aur.* *Coloc.*  
*Lycopod.* *Mang.* *Merc.* *Pulsat.*  
***Rhus.*** *Sulph.*
- in the forenoon: *Alum.* *Ambra.*  
*Ant. crud.* *Argent.* *Bar.* ***Calc.***  
*Cann.* *Carb. vegetab.* *Caust.* *Coc-*  
*cul.* *Con.* *Euphorb.* *Ferr.* *Graph.*  
*Guaj.* *Hep.* *Ign.* *Kali.* *Laur.* *Lyc.*  
*Magn. mur.* *Mang.* *Nux mosch.*  
*Nux vom.* *Phosph.* ***Phosph. ac.***  
*Puls.* *Rhus.* *Sabad.* *Selen.* *Sepiæ.*  
*Sil.* *Spig.* ***Staph.*** *Sulphur.* *Sulph.*  
*ac.* *Viol. tr.*
- when hungry: *Aur.* *Graphit.* *Iod.*  
*Kali.*
- — inspiration: *Aconit.* *Anac.* *Arn.*  
***Bry.*** *Calc.* *Chamon.* *Croc.* *Guaj.*  
*Hyosc.* *Ipec.* *Lyc.* *Merc.* *Mosch.*  
*Oleand.* ***Rhus.*** *Sabad.* *Sabina.*  
*Selen.* *Squill.* *Spong.* *Sulph.*
- by laughing: *Ars.* *Bell.* *Bor.* *Carbo*  
*veg.* *Chin.* *Con.* *Nux vom.* ***Phosph.***  
*Stann.*
- in bright light: *Ant. crudum.* ***Bell.***  
***Calc.*** *Cham.* *China.* *Coffea.* *Con.*  
*Croc.* ***Euphr.*** *Graph.* *Hep.* *Ign.*  
*Lyc.* *Magn. mur.* *Merc.* *Natr.* *Nux*  
*vom.* *Phosphor.* *Phosph. ac.* *Pul-*  
*sat.* *Rhus.* *Sep.* *Sil.* *Spig.* *Stram.*  
*Sulph.*
- when looking in the bright light:  
*Bry.* *Bell.* ***Calc.*** *Kali.* *Merc.* ***Phosph.***  
*Zinc.*
- — down: *Calc.* *Spig.*
- — up: ***Calc.*** *Graphit.* *Puls.* *Selen.*  
*Sil.* *Thuj.*
- — sidewise: ***Bell.***
- — lying down: *Ambra.* *Amm. mur.*  
*Ars.* *Asa f.* *Aur.* *Aur. mur.* *Bry.*  
*Canth.* *Caps.* ***Chamom.*** *Coloc.*  
*Conium.* *Croc.* *Dros.* *Dulc.* *Ferr.*  
*Ign.* ***Kali.*** *Lyc.* *Magn. mur.* *Men.*  
*Mur. ac.* *Natr.* *Op.* *Phos. ac.*  
*Plat.* ***Puls.*** *Rhod.* ***Rhus.*** *Samb.*  
*Selen.* *Sepiæ.* *Stann.* *Stront.*  
*Sulph.* *Tar.* *Tart. emet.* *Teucr.*
- in bed: *Alum.* *Ambr.* *Ant. crud.*  
***Ars.*** *Aur.* *Bellad.* *Bor.* *Calc.*  
*Carbo veg.* *Cham.* *Chin.* *Cina.*  
*Coff.* *Coloc.* *Dros.* *Ferr.* *Graph.*  
*Ign.* *Iod.* *Kali.* ***Led.*** *Lycop.*  
*Magn.* *Mang.* *Merc.* *Mur. ac.*  
*Nitric ac.* *Nux vom.* *Phosph.*  
*Plat.* ***Puls.*** *Rhod.* ***Rhus.*** *Samb.*  
*Sec. corn.* *Selen.* ***Sep.*** *Sil.* *Spig.*  
*Sulphur.* *Tart. emet.* *Veratr.*  
*Viol. od.*
- on the back: *Ars.* *Canth.* *Caust.*  
*Cham.* *Chin.* *Cuprum.* *Ign.* *Iod.*  
*Kali.* *Lach.* *Mercur.* *N. vom.*  
*Phos.* *Puls.* *Rhus.* *Sep.* *Sulph.*  
*Thuj.*
- on the side: *Acon.* *Anac.* *Arn.*  
***Bry.*** *Calad.* *Calc.* *Carbo an.*  
*Con.* ***Ferr.*** *Ign.* ***Kali.*** *Lyc.* *Merc.*  
*N. vom.* *Puls.* *Seneg.* *Stann.*  
*Sulph.* *Viol. tr.*
- on the painful side: *Acon.* *Arn.*  
*Ars.* ***Bar.*** *Calad.* *Caustic.* *Chin.*  
*Graph.* *Hep.* *Iod.* *Kali.* *Lyc.*

- Magn. Nitr. ac. N. mosch. N. vom. **Phosphor.** Phosph. ac. Ruta. Selen. Sil. Spong. Thuja.
- on the painless side: *Ambr.* Arn. Bry. Calcar. Caustic. Cham. Coloc. Ignat. Kali. M. austr. Puls. Rhus. Stann.
- after lying down in the evening: *Ambr.* Amm. Ars. Aur. Caustic. Cham. Coff. Dros. Dulc. Ferr. Hyosc. Ign. Kali. Lye. Magn. Magn. mur. Nitric ac. Plat. Plumb. Puls. Rhus. Samb. Seneg. Sepiev. Stront. Sulph. Tar. emet. Veratr. Viol. od.
- at new-moon: Calc. Caustic. Cupr. Lye. Sep. Sil.
- at full-moon: Calc. Graph. Natr. Sil. Sulph.
- in the morning: Acon. Ambr. Amm. mur. Ant. crud. Aur. Calad. Calc. Carb. an. Carb. veg. Chel. Cic. Coccul. Coffea. Con. Croc. Dulcam. Euphr. Graph. Hep. Hyosc. Ign. Iod. Kali. Lye. M. austr. Natr. Natr. mur. Nitr. Nitric ac. N. vom. Op. Petr. Phosph. Phosph. ac. Rheum. Rhodod. Rhus. Selen. Sep. Squill. Staph. Sulphur. Tar. Tart. emet. Veratr.
- during motion: Anac. Arn. Asar. Bell. Bry. Camphor. Carb. veg. Chel. Coccul. Colchic. Croc. Graph. Heil. Hep. Iod. Led. M. austr. Mercur. Natr. Natr. mur. Nitric ac. N. vom. Petr. Phosphor. Rhod. Rhus. Sabad. Sec. corn. Selen. Squill. Spig. Spongia. Staph. Sulph. ac.
- at the beginning of motion: Caps. Caust. Con. Ferrum. Lye. Phosph. Puls. Rhus. Samb.
- at night: Acon. Ambr. Ang. Ant. crud. Arn. Arsen. Aur. Bell. Bry. Calc. Camph. Canth. Caps. Carbo an. Caust. Cham. Chin. Coff. Colch. Con. Croc. Cupr. Dulcam. Ferr.
- Graph. Hell. Hep. Ign. Iod. Kali. Lach. Lycop. Magn. Magn. mur. Mang. Merc. Mezer. Natr. mur. Nitric ac. Nux vom. **Op.** Phosphor. Plumb. Samb. Secale corn. Selen. Sil. Staphys. Stront. Sulph. Tar. emet. Thuja.
- when nursing: Acon. Bell. Bryon. Calcar. Cham. China. Con. Dulc. Kali. Merc. Phos. ac. Pulsat. Rhus. Sep. Sil. Staph. Sulph.
- by suppressed perspiration: **Bell.** Bryon. Calc. Cham. Chin. Dulc. Kali. Lye. Merc. Nux vom. Oleand. Phosphor. Phosph. ac. Rhus. Sec. corn. Sep. Sil. Sulph.
- by external pressure: Agar. Ang. Ant. crud. Bar. Bry. Cann. Carbo veg. Cina. Cupr. Hepar. Ign. Iod. Lach. Lye. Mosch. Natrum mur. Oleand. Plat. Ruta. Sabin. Selen. Sep. Sil. Spong. Staph. Stramon. Sulph. Verb.
- raising the trunk: Acon. Arn. Ars. Bell. Bry. Cham. China. Cic. Con. Ferr. Ignat. Mur. ac. N. vom. Op. Phosph. Puls. Rhus. Squill. Spong. Sulph. Sulph. ac.
- by reading: Asa f. Bar. Bell. Calc. Chin. Coff. Con. Croc. Graph. Ign. Kali. Lye. Natr. Natr. mur. Nux vom. Phos. Sil. Sulph. Sulph. ac. Vit.
- during rest: Arsen. Asa flet. Aur. Calc. Caps. Chin. Coloc. Con. Dulcam. Euphorb. Ferr. Ignat. Kali. Lach. Lye. Mosch. Natrum. Nitr. Oleand. Op. Phosphor. ac. Plat. Puls. Rhod. Rhus. Sabad. Samb. Selen. Sep. Stannum. Stront. Tar. Thuja. Valer. Veratrum. Viol. tr.
- when rising from a seat: Bell. Bry. Calcar. Caps. Carbo veget. Cham. Coccul. Con. Ferr. Graph. Ign. Laches. Laur. Lye. Natr. mur. Nux vom. Phos. Pulsat. Rhus. Selen. Spig. Tart. emet. Thuja.



- in the room: *Acon. Alumina. Anac. Ant. crud. Asa fœt. Asar. Calc. Carbo veget. Cic. Con. Croc. Graph. Hell. Iod. Lyc. Magn. Mezer. Natrum mur. Phosph. Plumb. Puls. Ran. sc. Rhodod. Sabina. Selen. Spong. Stann. Veratr. Vit.*
- by running: *Arn. Ars. Bell. Bry. Caust. Ign. Led. Natr. mur. N. vom. Oleand. Sil. Sulph.*
- by sexual intercourse: *Calad. Kali. Selen.*
- after sexual intercourse: *Agar. Calad. Calc. Chin. Kali. Natr. Petr. Phos. ac. Selen. Sep. Staph.*
- when sitting: *Agar. Ambr. Ant. crud. Asa f. Aur. Bar. Calc. Caps. Chin. Cina. Coff. Con. Cuprum. Cycl. Dule. Euphorb. Graph. Ignat. Iod. Lach. Lyc. M. arct. Magn. mur. Muriat. ac. Natr. Nitric ac. Oleand. Phosph. ac. Platina. Puls. Rhod. Rhus. Sabad. Seneg. Sep. Spong. Sulph. ac. Tar. Thuja. Veratrum. Verb. Viol. tr.*
- smoking tobacco: *Ant. crud. Calc. China. Euphr. Ignat. Lach. Nux vom. Puls. Rhus. Ruta. Selen. Spong. Staph.*
- in the spring: *Ambr. Bellad. Calc. Carbo veg. Lyc. Natr. mur. Puls. Rhus. Sulph. Veratrum.*
- when standing: *Alum. Aur. Calcar. Cann. Caustic. Coloc. Con. Cycl. Euphr. Ferrum. Graph. Ign. Laur. Lyc. Magn. mur. Mosch. Natr. Oleander. Op. Phosph. ac. Puls. Rhod. Rhus. Samb. Sep. Staphys. Sulph. Tar. Valer. Veratr.*
- when stooping: *Aco. Amm. Arn. Bar. Bry. Calc. Caps. Cham. Coccul. Croc. Graph. Hep. Ipec. Kali. Mang. Mercur. Nitr. Oleander. Petr. Plumb. Rhod. Seneg. Sep.*
- Sil. Spigel. Stront. Teucr. Thuja. Valer.*
- in the summer: *Antim. crud. Bell. Bry. Carbo veget. Lach. Lyc. Natr. Natr. mur. Puls. Selen. Veratr.*
- in the sun: *Antim. crud. Camphor. Euphr. Graphit. Ipecac. Lach. Natr. Pulsat. Selen.*
- after suppressed catarrh: *Bry. Calc. Carbo veg. Chin. Con. Dule. Graph. Ipec. Lyc. Merc. Natr. mur. Nitric ac. Nux vom. Phosph. Puls. Rhod. Sep. Sil. Sulph. Sulph. ac.*
- when swallowing: *Acon. Ars. Bar. Bell. Bry. Camph. Chin. Coccul. Coffea. Croc. Hep. Hyosc. Kali. Magn. Merc. Nitric acid. Nux vom. Petr. Phos. Puls. Rhus. Sassap. Sep. Spig. Staph. Thuja. Veratrum.*
- after swallowing: *Ambr. Bry. Cham. Hep. Ign. Iod. Nitric ac. N. vom. Phos. Pulsat. Rhus. Zinc.*
- between the acts of swallowing: *Ambra. Arn. Graphit. Ign. Lach. Laur. Merc. Nux vom. Phosph. ac. Sabin. Spong. Stann. Staph.*
- when sweating: *Acon. Arsen. Bry. Caust. Cham. Cocc. Dig. Ferr. Ign. Ipec. Lycop. Merc. Natr. Nux vom. Op. Phosph. Pulsat. Rhus. Selen. Sep. Stram. Sulph. Tart. em. Thuja. Veratr.*
- when talking: *Ambr. Arnica. Bell. Calc. Cann. Cham. Chin. Coccul. Dig. Dule. Graph. Ign. Iod. Lyc. Mang. Merc. Natrum. Natr. mur. Phosph. Phosph. ac. Rhus. Selen. Sep. Sulph.*
- during a thunder-storm: *Lach. Natrum. Phosph. Rhod. Sil.*
- after uncovering one's self: *Ant. crud. Ars. Aur. Bell. Cham. China. Cic. Clem. Colchic. Graph. Hep. Hyosc. Ign. Lach. Natr. Natr. mur. Nux mosch. Nux vom. Puls. Rhod. Rhus. Samb. Sil. Stram. Stront.*

- from vomiting: *Ars. Asar. Bryon. Cupr. Ipec. Nux vom. Plumb. Puls. Sep. Sil. Sulphur. Veratr.*
- on waking: *Ambra. Amm. mur. Arn. Ars. Bryon. Calad. Calc. Carbo veg. Caust. Chin. Coccul. Digit. Graphit. Hepar. Ign. Kali. Magn. mur. Merc. Natr. Natr. mur. Nitric acid. Nux vom. Phosphor. Pulsat. Rhus. Sabin. Samb. Sepiæ. Staph. Stront. Sulph.*
- walking fast: *Arn. Ars. Bell. Bry. Caust. Cupr. Led. Lyc. Nux vom. Oleander. Rhus. Silic. Spig. Squill. Sulph.*
- when walking out into the cold air: *Ars. Caust. Mosch. Nux vom. Ran. bulb. Sabad.*
- in warmth: *Ambr. Ant. crud.\*Bell. Calad. Carb. veg. Cham. Coc. Dros. Graph. Ign. Iod. Ipec. Lach. Led. Lyc. Merc. Natr. mur. Nux mosch. Op. Phosph. ac. Pulsat. Rhus. Sec. corn. Selen. Senega. Sep. Staph. Tart. emet. Thuja.*
- by watching: *Ambra. Coccul. Merc. N. vom. Puls. Selen. Sep.*
- after getting wet: *Ars. Bell. Bry. Calc. Colch. Dulcam. Ipec. Lyc. N. mosch. Pulsat. Rhus. Sec. corn. Sep. Sulph.*
- by a change of weather: *Ammon. Bry. Calc. Dulc. Graphit. Mang. Nux mosch. Phosph. Puls. Rhod. Rhus. Sep. Sil. Sulph.*
- damp weather: *Ammon. Aur. Calc. Carbo veg. Chin. Dulc. Ferr. Lach. Laur. Lyc. Merc. Muriat. ac. Nitric ac. Nux mosch. Puls. Rhod. Rhus. Ruta. Seneg. Spig. Staphys. Sulph. Veratr.*
- in stormy weather: *Arsenic. Cham. Lach. Lyc. Mur. ac. Natr. N. mosch. Nux vom. Phos. Puls. Rhod. Rhus. Spig. Sulph.*
- in dry weather: *Asar. Bellad. Bry. Carbo veg. Caustic. Cham. Hep.*

*Ipec. Mur. ac. Nitric ac. Nux vom. Phosph. Sabad. Sil. Spong.*

—by wet: *Amm. Ant. crud. Bellad. Calc. Canth. Carbo veg. Clem. Dulc. Lyc. Merc. Nitric ac. Nux vom. Phosph. Puls. Rhus. Sep. Sil. Spig. Staph. Stront. Sulph.*

—in winter: *Acon. Ars. Aur. Bar. Bell. Bry. Caust. Cham. Coccul. Con. Dulcam. Hell. Hep. Ign. Kali. Lyc. Merc. Nux mosch. Nux vom. Puls. Rhod. Rhus. Sep. Sulphur. Veratr.*

—when writing: *Anac. Asa f. Calc. Carbo veget. Coccul. Graph. Ign. Kali. Lyc. Natr. Natr. mur. Nux vom. Phosph. Ruta. Sil. Spong. Zinc.*

### Amelioration of the Pains.

IN THE OPEN AIR: *Alum. Anac. Asa f. Aur. Bar. Cann. Carbo veg. Con. Croc. Graph. Hell. Ign. Iod. Kali. Lycop. Magn. Mezer. Natr. Phosph. Plat. Puls. Sabin. Selen. Sepiæ. Spong. Stront. Sulph. Veratr. Vit.*

BY BORING INTO THE EAR OR NOSE: *Lach. Natr. Phosph. Thuja.*

BEFORE BREAKFAST: *Caust. Cham. Chin. Cou. Kali. Lyc. Natr. mur. N. mosch. Phosph. Phosph. ac. Sabin. Selen. Sil. Sulph. ac. Zinc.*

BY DEEP BREATHING: *Ign. Lach. Oleand. Spig.*

WHEN CHEWING: *Bryon. Chin. Spig.*

IN THE COLD: *Ambra. Ant. tart. Asar. Cin. Croc. Dros. Graph. Iod. Kali. Led. Lyc. Merc. Natr. Natr. mur. Plat. Puls. Rhus. Sec. corn. Sep. Sulph. Thuja. Veratr.*

BY CONTACT: *Anac. Asa f. Calc. carb. Cycl. Drosera. Lycop. Mang.*

Mur. acid. *Natr. Phosph. Sulph. Thuja.*  
 IN THE DARK: *Bar. Bell. Calc. carb. China. Con. Croc. Enphur. Graph. Ignat. Kali. Lyc. Mercur. Natr. Phosph. Phosph. ac. Puls. Sepiæ. Sil. Sulph.*  
 AFTER DRINKING: *Bry. Graph. Phosph. Rhus. Sil.*  
 AFTER EATING: *Calc. c. Cann. Chel. Ferr. Graph. Ign. Iod. Kali. Lach. Merc. Natrum. Phos. Squill. Stront. Veratr.*  
 WHEN EATING: *Ambr. Anacard. China. Croc. Ferr. Graphit. Igu. Iod. Lach. Merc. Nux vom. Puls. Spig. Staph. Tar. Zinc.*  
 BY ERUCTATIONS: *Ant. tart. Bar. Carbo veg. Coccul. Graphit. Igu. Kali. Lach. Lyc. Natr. Nux vom. Sil. Sulph.*  
 BY FOOD AND DRINK, bread :  
   *Caust. Natr.*  
 —vinegar: *Puls.*  
 —meat: *Veratr.*  
 —coffee: *Ars. Cham.*  
 —cold food: *Bell. Bry. Cham. Ferr. Kali. Laches. M. austr. Merc. Phosph. Phosphor. ac. Puls.*  
 —warm food: *Ars. Con. Graph. Ign. Lyc. Mur. ac. N. mosch. Nux vom. Rhus. Sulph. Veratrum.*  
 —cold water: *Bry. Caustic. Phosph. Puls. Sep.*  
 —warm water: *Nux vom. Rhus.*  
 —wine: *Con. Lach. Op.*  
 BY IMPOSING ONE'S HAND: *Bell. Croc. Natr.*  
 BY MENTAL LABOR: *Croc. Ferr. Natr.*  
 BY BODILY LABOR: *Ign. Natr. Rhus. Sep.*  
 BY LEANING AGAINST: *Carbo veg. Ferr. Kali. Staph.*  
 IN THE LIGHT: *Calc. c. Carbo an. Carbo veg. Con. Plat. Stront.*  
 WHEN LYING DOWN: *Alum.*

*Ambra. Arn. Bell. Bry. Calc. c. Canth. Caust. Coccul. Colch. Croc. Dig. Graph. Hep. Iod. Merc. Natr. Natr. mur. N. vom. Oleand. Phos. ac. Sassap. Squill. Sec. corn. Stannum. Straph. Stram.*  
 —in bed: *Bell. Bry. Canth. Caust. Cic. Cin. Con. Dig. Ferr. Lach. Lyc. Natrium mur. Nitric ac. Nux vom. Phosphor. Rhus. Sabad. Squill. Selen. Sil. Staph. Stram. Veratr.*  
 —on the back: *Acon. Bry. Calc. c. Carbo an. Con. Creos. Ferr. Ign. Kali. Lyc. Natr. mur. Nur vom. Plat. Sepiæ. Stann. Sulph.*  
 —on the side: *Arn. Ars. Bry. Cham. Cupr. Iod. Lach. Natr. N. vom. Phosph. Rhus. Sep.*  
 —on the affected side: *Bry. Cham. Ign. Kali. Puls. Rhus.*  
 —on the painless side: *Acon. Ars. Bar. Bell. Graph. Hep. Iod. Nur vom. Phos. Ruta. Sil. Sulph. Thuja.*  
 —with the head high: *Ant. tart. Ars. Cann. China. Hep. Nux vom. Puls. Spig.*  
 —bent double: *Coloc. Pulsat. Rheum.*  
 IN THE EVENING, after lying down: *Bar. Bell. Bry. Calc. c. Carbo veg. Cic. Cin. Croc. Graph. Hell. Hep. Iod. Natr. mur. Nux vomica. Oleand. Rheum. Rhodod. Secale corn. Squill. Staph.*  
 BY MOTION: *Ambr. Asa f. Aur. Caps. Chamom. Con. Cycl. Dulc. Ferr. Fluor. ac. Lach. Lyc. Merc. Mosch. Nitr. Op. Phosphor. ac. Puls. Rhodod. Rhus. Sabad. Samb. Sepiæ. Sulph. Tar. Valer. Verb.*  
 BY CONTINUED MOTION: *Con. Ferr. Kali. Lyc. Puls. Sil. Valer. Veratr.*  
 BY EXTERNAL PRESSURE: *Amm. mur. Anac. Ars. Aur. Bry.*

Canth. Chel. **Con.** Dulcam. *Graph.*  
 Ign. Kali. *Magn. mur. Men. Mur.*  
 ac. **Natr.** Nux vom. *Phosphor. ac.*  
 Plumb. **Rhus.** Sulphur. Sulph. ac.  
 Veratr. *Vit.*

BY RAISING ONE'S SELF: Ant.  
 tart. **Arsen.** *Calc. c. Cham. China.*  
 Dig. **Ign.** Kali. Lyc. Oleand. *Puls.*  
*Samb. Sep. Sil. Sulph.*

WHEN READING: *Natr.*

IN REST: Agar. Anac. Ant. tart.  
 Asar. *Arn. Bell. Bry.* Calad. Carbo  
 an. *Carbo veg. Caustic. Chel. Coff.*  
*Colch. Croc. Ferr. Graph. Hell.*  
*Iod. Ipec. Led. Mang. Merc. Natr.*  
*mur. Nux mosch. N. vom. Phosph.*  
 Plat. Rheum. Rhod. *Selen. Spigel.*  
*Squill. Staph. Sulph. ac.*

WHEN RIDING IN A CAR-  
 RIAGE: *Graph. Nitric ac.*

IN THE MORNING AFTER RIS-  
 ING: *Ambr. Ant. tart. Ars. Bell.*  
 Calad. Carbo anim. Cycl. *Euphorb.*  
**Ferr.** *Graph. Ign. Iod. Kali. Led.*  
*Lyc. Mang. Mercur. Merzer. Natr.*  
*Nux vom. Phosph. Pulsat. Rhus.*  
*Selen. Sep. Sulphur. Veratr. Viola*  
*od.*

IN THE ROOM: *Agar. Amm. mur.*  
 Ars. Bell. *Calc. carb. Camph. Cann.*  
 Carbo an. *Carbo veg. Cham. Chin.*  
**Coccul.** *Con. Creos. Ferr. Guaj.*  
*Ign. Lach. M. austr. Natr. Nitr. ac.*  
*N. mosch. Nux vom. Oleand. Petr.*  
 Rheum. Ruta. *Selen. Sil. Spig.*  
 Stram. Sulph. ac. *Teucr. Valer.*

BY SCRATCHING: *Asa fœt. Bry.*  
*Calc. c. Caust. Cic. Cycl. Ign. Led.*  
*Mur. ac. Natr. Oleand. Phosphor.*  
*Ruta. Sulph. Sulph. ac. Thuja.*

BY SLEEP: *Ars. Ipec. Nux vom.*  
**Phosph.** *Puls.*

WHEN SITTING: **Bryon.** Calad.  
 Camph. Cann. *Chamom. Cic.*  
**Coffea.** *Colch. Croc. Hell. Hyosc.*  
*Iod. Merc. Mezer. N. mosch. Nux*

*vom. Phosph. Rheum. Rhus.*  
*Squill. Secale corn. Staph.*

WHEN STANDING: Antim. tart.  
 Asar. **Bell.** *Calad. Calcar. c. Coccul.*  
*Colehic. Croc. Hell. Hep. Iod. Ipec.*  
*Led. Mercur. Mur. ac. N. vom.*  
*Phos. Ruta. Squill. Selen. Spig.*  
*Vit.*

IN SOCIETY: **Arsen. Kali. Lyc.**  
*Stram.*

IN SWALLOWING: *Ambr. Graph.*  
**Ign.** *Lach. Led. Merc. Nux vom.*  
*Pulsat. Squill. Spongia. Staph.*

IN SWEATING: Calad. **Cham.**  
*Clem. Graph. Hep. Lyc. Nitr. ac.*  
*Nux vom. Oleand. Rhus. Selen.*  
*Stram. Thuja. Veratr.*

BY UNCOVERING ONE'S SELF:  
*Calc. c. Chamom. Ferr. Ignat. Iod.*  
**Lyc.** *Phosph. Puls. Secale corn.*  
*Spig. Veratr.*

ON WAKING: *Ars. Calad. Hell.*  
 Nux vom. **Phosph. Pulsat. Sep.**  
*Thuja.*

WHEN WALKING FAST: **Ignat.**  
*Natr. mur. Sep.*

BY THE WARM STOVE: *Ars.*  
*Aur. Caust. Con. Hep. Ign. Kali.*  
*Magn. N. vom. Rhod. Rhus. Stront.*  
*Sulph.*

BY WASHING: *Amm. mur. Ars.*  
*Asar. Caust. Chel. Pulsat. Rhod.*  
*Spig.*

— the face: *Asar. Mezer. Saba-*  
*dilla.*

BY WEEPING: Anac. **Ign. Lyc.**  
 IN DAMP WEATHER: *Acon. Asar.*  
**Caust.** *Hep. Ipec. N. vom. Sil.*  
*Spong.*

IN DRY WEATHER: Ant. crudum.  
**Calc. carb.** *Chin. Dulcam. Ferr.*  
*Lach. Lyc. Merc. Natr. N. mosch.*  
*Pulsat. Rhus. Sulph. Veratr.*

BY WIPING WITH THE HAND:  
*Asa fœt. Calc. c. Cina. Cycl. Ign.*  
**Natr.** *Phosph. Plumb. Puls. Thuja.*



IN WARMTH: *Acon. Amm. Arn.*

*Ars. Aur. Bar. Bell. Camph. Carbo veget. Caust. China. Cic. Coccul. Dule. Ferrum. Graph. Hell. Hep. Hyoscyam. Ign. Kali. Lach. M. austr. Magn. Merc. Mosch. Natr. N. mosch. Nux vomica. Petr. Phos. Rhod. Rhus. Sabad. Samb. Squill. Sil. Staphys. Stront. Sulph. ac. Verat. Zinc.*

ANÆMIA: *Arn. Ars. Bell. Bry.*

*Calc. c. Carbo veg. Chamom. Chin. Con. Ferr. Ign. Iod. Kali. Lach. Lyc. Merc. Natr. Natr. mur. Nitric. ac. N. vom. Phosph. ac. Puls. Rhus. Sep. Sil. Squill. Staph. Sulphur. Sulph. ac. Veratr.*

ANEURYSMS: *Carbo veg. Ferr.*

*Graph. Kali. Lach. Lyc. Puls. Sulph.*

APPARENT DEATH: *Arn. Bellad.*

*Carbo veg. Cham. Chin. Lach. Nux vom. Op. Tart. emet.*

APOPLEXY: *Acon. Arn. Baryt.*

*Bell. Calc. Camph. Caust. Chin. Coccul. Coff. Dig. Ferr. Hyosc. Ipec. Lach. Lycop. Merc. N. vom. Puls. Rhus. Sil. Stram. Tart. emet. Veratr.*

ATROPHY: *Ars. Baryt. Bellad.*

*Calc. c. China. Cina. Iod. Ipec. Lach. Merc. Nux vom. Rhus. Sil. Sulph.*

## BONES, affections of, in general:

*Arn. Ars. Asa fæt. Aur. Bell. Calc. carb. Calc. phosph. Carbo veget. China. Con. Dule. Graphit. Hep. Iod. Kali bichr. Lach. Lycop. Merc. Mezer. Nitric ac. Phosph. Pulsat. Rhus. Ruta. Sabin. Sec. corn. Sil. Spong. Staphysag. Sulph. Sulph. ac. Thuj.*

—swelling: *Asa f. Aur. Calc. Dule. Guaj. Hep. Lyc. Merc. Nitric acid. Phosphor. Puls. Rhus. Ruta. Sil. Staph. Sulphur.*

—fractures: *Arn. Asa f. Calc. Lycop. Rhus. Ruta. Sil. Symphyt. Sulph.*

—inflammation: *Asa fæt. Aur. Bell. Calc. Chin. Hep. Lycop. Merc. Nitric ac. Phosph. Sil. Sulph.*

—pains: *Ars. Asaf. Aur. Bar. Calcar. China. Cic. Daph. Fluor. ac. Lach. Lyc. Merc. Nitric ac. Phos. Phosphor. ac. Plumb. Ruta. Sil. Staph. Sulph.*

—curvature: *Asa fæt. Bellad. Calc. Calc. phosph. Hep. Iod. Lyc. Merc. Phosph. Plumb. Rhus. Sil. Sulph.*

—caries: *Arsen. Asa fæt. Aur. Calc. Fluor. ac. Hep. Lyc. Merc. Nitric ac. Phosph. Phosph. ac. Ruta. Sep. Sil. Spong. Sulph.*

BLUE DISEASE: *Aco. Arn. Ars.*

*Aur. Bellad. Camph. Carbo veget. Chin. Con. Cuprum. Digit. Ferr. Ipecac. Lach. Merc. Nux vom. Op. Phosph. Pulsat. Rhus. Sec. corn. Veratr.*

BOUNDING, as of something: *Croc.*

BURNS: *Ant. crud. Arn. Ars. Carb. veg. Caust. Creos. Laches. Secale corn. Stram.*

CHAGRIN, consequences of: *Aco.*

*Ars. Bry. Cham. Chin. Coff. Coloc. N. vom. Phosph. Ph. ac. Plat. Staph.*

—suppressed: *Ign. Phosph. ac.*

—with wrath: *Coloc. Staph. N. vom.*

## CHAMOMILE, excessive use of:

*Acon. Coff. Ign. Puls. Nux vom.*

CHILDREN, diseases of: *Acon. Bar.*

*Bell. Bryon. Calcar. Cham. Cin. Coff. Drosera. Hep. Hell. Ign. Iod. Ipec. Merc. Nux mosch. Nux vom. Puls. Rheum. Silic. Spongia. Sulph.*

## CHINA, aliments from abuse of:

*Arn. Ars. Bell. Calc. c. Canthar. Carbo veg. Ferr. Ipec. Lach. Lyc. Merc. Natr. mur. N. vom. Sep. Puls. Sulphur. Veratr.*

**CHOLERA:** Ant. tart. Ars. Asar. Camph. Carbo veget. Cupr. Dule. Hydr. ac. Jatr. Ipecac. Lach. Nux vom. Phosph. Ph. ac. Sec. corn. Veratr.

**CHOLERINE:** Bry. Puls. Rhus.

**CHOLERIC TEMPERAMENT:** Acon. Anac. Bry. Caust. Cham. Cin. Cupr. Hyosc. Kali. Lach. Natrum. Nitric ac. Nux vom. Op. Phosphor.

**CHLOROSIS:** Bell. Calc. carb. Camph. Chin. Coccul. Conium. Croc. Ferr. Graphit. Hell. Ign. Kali. Lach. Lyc. Natr. mur. Nitric ac. Nux vom. Plat. Plumb. Puls. Sep. Staph. Sulph. Valer.

**COLD, taking:** Acon. Ant. crud. Ars. Bell. Bry. Calc. Caust. Cham. Coff. Dulcam. Hep. Ipec. Merc. N. vom. Phosph. Puls. Rhus. Sil. Sulph.

—liable to take: Aconit. Bell. Bry. Calc. Carbo veg. Caust. Cham. China. Dros. Dule. Hep. Lyc. Merc. Natrum. Nitric ac. Nux vom. Puls. Rhus. Sep. Sil. Sulph.

**COMPLAINTS, periodical:** Arnica. Ars. Bell. Bry. Carbo veget. Chin. Ign. Ipec. Natrum mur. N. vom. Puls. Rhus. Spig. Sulph.

**CONCUSSION:** Arn. Bell. Bry. Cic. Con. Nux vomica. Rhus. Veratr.

**AILMENTS INCIDENT TO CONFINEMENT:** Aconit. Agn. Arnic. Bell. Bry. Calc. Cham. China. Coff. Hep. Hyosc. Ignat. Lyc. Merc. N. vom. Op. Phosph. ac. Plat. Puls. Rhus. Sec. corn. Sil. Sulph. Veratr.

**CONGESTIONS OF BLOOD:** Acon. Amm. Arn. Asa f. Aur. Bell. Bry. Calc. c. Carbo vegetab. Chin. Croc. Cupr. Dig. Ferr. Graph. Hyosc. Kali. Lycop. Merc. Natr. mur. Nitric ac. N. vom. Op.

Phosph. Puls. Rhus. Seneg. Sep. Sil. Stram. Sulph. ac. Veratrum. Viola tr.

**CONTUSIONS:** Acon. Arg. Arn. Cic. Con. Led. Oleand. Petr. Puls. Rhodod. Rhus. Ruta. Sulph. Sulph. ac.

**CRAWLING:** Bell. Calcar. Sep. Sulph.

**DEBILITY, nervous:** Arn. Baryt. Bell. Calc. Carbo veget. Cham. Chin. Coff. Cuprum. Graph. Hyosc. Ign. Iod. Ipec. Lach. Lyc. M. arct. Mercur. Natr. Natr. mur. Nitric ac. Nux mosch. N. vom. Phos. Phosph. ac. Plat. Pulsat. Rhus. Sec. corn. Selen. Sil. Stann. Stram. Valer. Veratr.

**DRUNKARDS, ailments of:** Acon. Ars. Bell. Calc. Carbo veget. Hyosc. Ign. Lach. Natrum. Natr. mur. Nux vom. Op. Puls. Rhus. Sil. Stram. Sulph.

**DRYNESS OF INNER PARTS:** Acon. Ambr. Ars. Asa f. Bellad. Bry. Calad. Calc. Carbo veg. Cham. Cic. Con. Croc. Dule. Graph. Hyosc. Ign. Lyc. Magn. mur. Mang. Merc. Natrum. Natr. mur. Nitric acid. Nux mosch. Nux vom. Par. Phosph. Puls. Rhus. Samb. Sec. corn. Seneg. Sepiæ. Sil. Spong. Stram. Sulph. Veratr. Zinc.

**EMACIATION:** Ambra. Anacard. Ars. Bar. Bry. Calc. carb. Canthar. Carbo veg. Chamom. Chin. Chlor. Cina. Coccul. Cupr. Dule. Ferr. Graphit. Hep. Ign. Iod. Ipec. Laches. Lyc. Merc. Natr. Natr. mur. Nitric ac. N. vom. Phosph. Phos. ac. Plumb. Puls. Sec. corn. Selen. Sil. Stann. Staphys. Sulph. Veratr.

**EXCESSES, consequences of:** Anacard. Ars. Bar. Calc. carb. Carbo veg. Chin. Conium. Kali. Lach. Mercur. Natr. Natr. mur. N. vom.

Phosph. *Phosph. ac.* Puls. Rhus.  
*Sec. corn.* Sep. Sil. **Staph.** *Sulph.*  
 Thuja. Veratr.

**FAINTING:** *Acon. Arn. Arsenic.*  
**Bell.** Bryon. Calc. Camphor. Cann.  
 Carbo veget. *Chamom.* China. Coc-  
 cul. *Coff.* Creos. *Dig.* Ferr. Hep.  
 Hyosc. **Ign. Ipec.** Lach. Laur.  
*Mosch.* N. mosch. N. vom. **Op.** Petr.  
 Phosph. *Phosph. ac.* Pulsat. Ran.  
 sc. Rhus. Sangn. *Secale corn.* **Sep.**  
 Sil. Spig. **Stramon.** **Tart. emet.**  
*Veratr.* Viola od.

**FAT,** tendency to get: **Antim. crud.**  
*Ars. Calcar. Caps. Croc. Cupr.*  
**Ferr.** Graphit. Lach. Lyc. Merc. *Op.*  
*Pulsat.* Spong. *Sulph.* Veratr.

**FEAR,** consequences of: *Acon. Bell.*  
 Hyosc. **Ign.** Lach. **Op.** Puls. *Verat.*

**FEMALES,** diseases of: *Acon. Agar.*  
*Alum.* Ambra. Arnica. **Bell.** Bor.  
 Calcar. Caps. Caustic. **Cham.** *Chin.*  
*Cic. Coccul. Con. Croc. Ferrum.*  
*Graph.* Hyoseyam. **Ign. Ipec.** Kali.  
 Lach. *Magn. mur.* Merc. Mosch.  
 Nux mosch. *Nux vom.* **Plat. Puls.**  
 Rhus. **Sabin.** *Sec. corn.* Selen. **Sep.**  
 Spongia. Stann. *Sulph.* *Valer.*  
 Veratr.

### Fever, General Character of.

**FEVER,** bilious: *Acon. Ant. crud.*  
 Ant. tart. *Ars. Bry. Bellad. Cham.*  
 Coccul. Coloc. *Creos. Ign. Ipec.*  
 Merc. Natrum mur. N. vom. Puls.  
*Sulph.* Verat.

—catarrhal: *Acon. Ars. Bry. Bellad.*  
 Caust. **Chamom.** *Con. Dulc. Ipec.*  
 Lach. *Magn. mur. Merc. N. vom.*  
 Puls. Rhus. *Sulph.*

—gastric: *Ant. crud. Antim. tart.*  
*Ars. Aur. Bell. Bry. Cham. Coccul.*  
*Coloc. Hepar. Ignat. Ipec. Mercur.*  
*Magn. e. N. vom. Phosph. ac. Puls.*  
 Rhus. *Sulph. Veratr.*

—yellow: *Acon. Ars. Bell. Bry. Croc.*  
*Ipec. Mercur. Nux vom. Puls.*  
 Rhus. *Sulph.*

—puerperal: **Acon. Bell. Bry. Cham.**  
*Nux vom. Puls. Rhus.*

—milk: *Acon. Bell. Calc. Coff. Puls.*

—nervous: *Acon. Arn. Arsen. Bell.*  
**Bry.** *Camph. Chamom. Hyosc. Ign.*  
*Lyc. Mercur. Mur. acid. N. vom. Op.*  
*Phosphor. ac. Rhus. Stram. Veratr.*

—rheumatic: *Acon. Arn. Ars. Bell.*  
**Bry.** Caustic. **Cham.** Colch. Dul-  
 cam. *Ipecac. Mercur. N. vom. Puls.*  
 Rhus. Sil. *Sulph.*

—wound: *Acon. Arn. Bry.*

—dentition: *Acon. Bell. Calc. Chamom.*  
*Merc. Nux vom. Sulph.*

—hectic: *Arsen. Calc. China. Coccul. Cupr. Dig. Ign. Iod. Ipec.*  
*Kali. Laches. Lyc. Nux vom.*  
**Phosph.** *Phosph. ac. Puls. Sil.*  
*Staph. Sulph.*

—typhus, abdominal: *Aconit. Ars.*  
**Bell. Bry.** *Merc. Nux vom. Phosph.*  
*ac. Rhus.*

—typhus, cerebral: *Acon. Arn. Ars.*  
**Bell. Bry.** *Carbo veget. Chin. Croc.*  
*Hyosc. Lach. Mercur. Mur. ac. N.*  
*vom. Op. Phosph. Phosph. ac.*  
*Pulsat. Rhus. Sulph. Veratr.*

—typhus, putrid: *Ars. Asa f. Bry.*  
*Carbo veget. Chin. Ferr. Graph.*  
*Hep. Ipec. Lach. Merc. Mur. ac.*  
*Nux vom. Op. Phos. ac. Rhus.*

**FLUIDS,** ill effects of loss of: *Calc.*  
*Carbo veg. Chin. Cin. Con. Lach.*  
*Lyc. Natr. Natr. mur. Nitric ac.*  
*Nux vom. Phosph. ac. Sulph.*  
*Sulph. ac. Thuja. Veratr.*

**FREEZING,** consequences of: *Aco.*  
**Ars. Bry.** *Carbo veg. Laches. Ni-*  
*tric ac. Sulph. ac.*

### Fever, According to Particular Symptoms.

**BURNING:** *Arsen. Bry. Rhus. Ve-*  
*ratr.*

**CHILLINESS IN GENERAL:**

- Ambra. Ant. tart. Arn. Ars. Bryon. Calc. Canth. Cham. China. Cin. Colch. Cupr. Ferr. Graph. Hep. Ign. Ipec. Lach. Lyc. Merc. Mezer. Natr. mur. Nux vom. Phosph. Phosph. ac. Puls. Rhus. Sabad. Sassap. Sep. Sil. Spig. Sulph. Thuj. Veratr.*
- external: *Arn. Chin. Lycop. Merc. Nux vom. Phos. Rhus. Veratr.*
- semi-lateral: *Ant. tart. Bry. Caust. Ignat. Lyc. Nux vom. Puls. Rhus. Spig.*
- internal: *Anac. Ars. Bellad. Bry. Calc. Chamom. China. Hell. Ignat. Ipec. Lach. Laur. Lycop. N. vom. Phosph. Pulsat. Squill. Sep. Thuj. Veratr.*
- with shaking: *Acon. Bryon. Caps. Cham. Chin. Ign. Ipec. Nux vom. Rhus. Veratr.*
- HEAT IN GENERAL:** *Aco. Amm. mur. Anac. Antim tart. Arn. Ars. Bell. Bry. Calc. Canth. Carb. veg. Caust. Cham. Chin. Cin. Coffea. Con. Cycl. Ferr. Graph. Hell. Hep. Ign. Ipec. Kali. Lach. Magn. mur. Merc. Mosch. Mur. ac. Nitr. ac. Nux vom. Op. Phosph. Phosph. ac. Puls. Rhus. Sabad. Sil. Squill. Stannum. Staph. Stram. Sulphur. Sulph. ac. Veratr.*
- external: *Acon. Ars. Bell. Bry. Calc. Camphor. Carbo veg. Cham. Cic. Coccul. Coff. Coloc. Digit. Dule. Euphorb. Hell. Hyosc. Ign. Kali. Lach. Lyc. Mang. Merc. Mur. ac. Nux vom. Op. Phosph. Puls. Rhus. Sep. Sil. Squill. Stram. Sulph. Zinc.*
- flashes of: *Arn. Calc. carb. Chin. Graph. Iod. Kali. Lycop. Natrum. Nux vom. Phosph. Plat. Puls. Rhus. Ruta. Sep. Stann. Sulph. Thuj.*

—semi-lateral: *Arn. Bell. Bry. Croc. Ignatia Lyc. Nux vom. Phosph. Puls. Rhus. Sulph.*

—internal: *Acon. Arn. Ars. Bell. Bry. Calc. Canth. Carbo veg. Caust. Cham. Cic. China. Coloc. Con. Graphit. Hel'. Ipec. Lyc. Magn. mur. Nitric ac. Nux vom. Phosph. Phosphor. ac. Puls. Rhus. Sabad. Samb. Sec. corn. Spig. Spong. Stann. Veratr. Zinc.*

**LOSS OF CONSCIOUSNESS:**

*Bell. Bry. Carbo veg. Hell. Hyosc. Lach. Op. Phos. ac. Rhus. Stram.*

**LOSS OF THIRST:** *Ant. tart. Ars. Canth. Carbo veg. Caust. Chin. Hell. Ipec. Merc. Puls.*

**PULSE,** intermittent: *Acon. Ars. Bry. Dig. Kali. Lach. Natr. mur. Op. Phosph. ac. Sec. corn. Stram. Sulph.*

—filiform: *Colch. Lach. Veratr.*

—large: *Acon. Bell. Bry. Cupr. Dig. Ferr. Hyosc. Ign. Merc. Nitr. Nux vom. Phosph. Spig. Stram. Veratr.*

—hard: *Acon. Arn. Bar. Bell. Bry. Canth. Chin. Digit. Ferr. Hyosc. Ign. Merc. Nux vom. Phosph. ac. Sabin. Samb. Sil. Stram. Veratr.*

—small: *Acon. Ant. tart. Ars. Bar. Bell. Calc. carb. Camph. Carbo veg. China. Cina. Cocc. Cupr. Iod. Ipec. Kali. Lach. Laur. Merc. Natr. mur. Op. Phosph. acid. Plat. Puls. Sec. corn. Sil. Stram. Sulphur. Sulph. ac. Veratr.*

—slow: *Ambr. Ant. crud. Ant. tart. Ars. Bell. Camph. Canthar. Cic. Con. Dig. Hell. Ign. Kali. Laur. Mosch. Op. Puls. Rhodod. Sec. corn. Sep. Stram. Veratr.*

—slower than the beats of the heart: *Cann. Dig. Hell. Sec. corn. Veratr.*

—quick: *Aco. Ant. tart. Arn. Ars. Asa f. Bell. Bism. Bry. Carbo veg. Coloc. Croc. Dig. Hyosc. Ignat.*



- Iod. Lach. M. austr. Merc. Nitric acid. Nux vom. Phosph. Phosph. ac. Pulsat. Rhus. Samb. Sil. Spong. Stann. Stram. Sulphur. Veratr. Zinc.*
- imperceptible: *Aconit. Ars. Carbo veg. Coccul. Cupr. Ferr. Ipec. Lach. Merc. Op. Sec. corn. Sil. Stann. Veratr.*
- irregular: *Agar. Antim. crud. Ars. Caps. Chin. Digital. Hyosc. Kali. Lach. Natr. mur. Op. Phosph. ac. Plumb. Sec. corn. Stram. Sulphur. Veratr.*
- soft: *Ant. tart. Ars. Baryt. Bellad. Carbo veg. China. Coccul. Cuprum. Iodine. Kali. Laur. Merc. Op. Phosphor. Plat. Sec. corn. Veratr.*
- tremulous: *Arsen. Calc. Cic. Kah. Phosph. Rhus. Sangn. Spig.*
- SHIVERING:** *Acon. Ars. Asa foet. Aurum. Bell. Calad. Canth. Caps. Cham. China. Coccul. Croc. Cycl. Ferr. Graph. Hep. Ign. Kali. Mercur. Mezer. Natr. Nitr. Nux vom. Puls. Rheum. Rhus. Sabad. Sec. corn. Sep. Staph. Valer. Veratr.*
- STRETCHING:** *Ars. Ipec. N. vom. Rhus.*
- SWEAT, in general:** *Aco. Ambr. Amm. mur. Ant. tart. Ars. Bar. Bell. Bry. Calc. Canth. Caps. Carbo an. Carbo veget. Caust. Cham. Chlor. Chin. Coff. Con. Dig. Dros. Ferr. Graph. Guaj. Hep. Hyosc. Ignat. Kali. Lye. M. austr. Magn. mur. Merc. Natrum. Natr. mur. Nitric ac. Nux vom. Phosph. Phosphor. ac. Puls. Rheum. Rhod. Rhus. Sabad. Samb. Selen. Sepiæ. Sil. Staph. Stram. Sulph. Tar. Thui. Veratr.*
- IRRITABILITY, bodily:** *Acon. Arn. Asar. Aur. Bell. Bry. Canthar. Cham. Chin. Coffea. Cupr. Ferr.*
- Hyosc. Ign. Lach. M. arct. Merc. Natr. Nux vom. Phosph. Pulsat. Rhus. Selen. Sil. Spong. Staphys. Veratr.*
- want of: *Anac. Ars. Bism. Calc. Camph. Carb. veget. Cic. Con. Croc. Dulc. Ferr. Graph. Hyosc. Ign. Iod. Ipec. Kali. Lach. Laur. Lycop. Magn. Merc. Nitric ac. Nux mosch. Oleand. Op. Phos. ac. Rhod. Sec. corn. Sep. Staph. Stram. Sulph.*
- JAUNDICE:** *Acon. Ambr. Ant. crud. Ars. Aur. Aurum mur. Bellad. Bry. Canth. Carbo veget. Cham. Chin. Con. Croc. Dig. Ferr. Hep. Ignat. Lach. Lycop. Merc. Nitric ac. Nux vom. Op. Pulsat. Rhus. Sulph. Sep. Veratr.*
- JEALOUSY, ailments from:** *Hyoscyam. Ignat. Lach. N. vom. Phos. ac. Puls. Staph.*
- JOY, consequences of excessive** *Acon. Coffea. Op.*
- LANGUOR:** *Antim. crud. Calc. c. Carbo veget. Coccul. Ignat. Iodine. Kali. Lach. Lye. Mercur. Mosch. Natr. Natr. mur. Op. Phosphor. Phosph. ac. Plat. Pulsat. Selen. Seneg. Sulph. Teucr. Thui. Valer.*
- LAZINESS:** *Alum. Arsen. Baryt. Bell. Bryon. China. Coccul. Guaj. Iod. Kali. Lach. Merc. Mur. ac. Natr. Natrum mur. N. vom. Oleander. Phos. ac. Puls. Sec. corn. Selen. Sep. Zinc.*
- LIMPING:** *Bell. Calc. Caust. Coloc. Merc. Pulsat. Rhodod. Rhus. Sep. Sulphur.*
- LOCHIA, morbidly altered:** *Bellad. Calcar. Con. Nux vom. Plat. Puls. Sec. corn.*
- MARASMUS OF OLD PEOPLE:** *Ant. tart. Bar. Calc. c. Con. Olean. Op. Phosph. Phosph. ac. Rhus. Secale corn.*
- MELANCHOLY TEMPERA-MENTS:** *Ars. Aur. Bellad. Calc.*

China. *Graph. Ignat. Lach. Lycop.*  
*Merc. Natr. Nux vom. Phosph. ac.*  
*Puls. Sep. Sil. Veratr.*

MOTION, dread of: *Ant. tart. Ars.*  
*Bar. Bell. Calad. Caps. Chin. Dule.*  
*Hell. Ign. Lach. Lyc. Merc. Natr.*  
*Natr. mur. Nux vom. Sulph. Thuj.*

MUCOUS MEMBRANES, diseases  
of the: *Alum. Apis. Arsenic. Bell.*  
*Bry. Calc. Caps. Caustic. Cham.*  
*China. Chlor. Dulc. Euphr. Fluor.*  
*ac. Hep. Ign. Lyc. Merc. Mur. ac.*  
*Natr. mur. Nitric acid. Nux vom.*  
*Phosph. Pulsat. Rhus. Sangn. Sep.*  
*Sil. Stann. Sulph. Sulph. ac.*

MUSCULAR TWITCHINGS: *Am-*  
*bra. Asa f. Bell. Clem. Coloc. Croc.*  
*Cuprum. Graph. Iod. Kali. Lach.*  
*Mezer. Natr. Natr. mur. Plat. Rhus.*  
*Secale corn. Sil. Spong. Sulphur.*  
*Sulph. ac. Viola tr. Zinc.*

GLANDULAR AFFECTIONS:  
*Ammon. mur. Apis. Arsenic. Aur.*  
*Baryt. Bell. Calc. carb. Carbo an.*  
*Carbo veget. Cham. Coccul. Con.*  
*Dulc. Graph. Hep. Iod. Kali. Lyc.*  
*Merc. Natr. Natr. mur. Nitric ac.*  
*Nux vom. Phosph. Phos. ac. Plumb.*  
*Ran. bulb. Rhus. Sep. Sil. Spong.*  
*Staph. Sulph. Sulph. ac. Thuj.*

GOUT: *Acon. Ant. crud. Arg. Arn.*  
*Ars. Asa f. Aur. Baryt. Bell. Bry.*  
*Calc. carb. Calc. phosphor. Caps.*  
*Carbo an. Carbo veg. Caust. Cham.*  
*Chin. Colch. Dig. Dulcam. Ferr.*  
*Graph. Hep. Ignat. Iod. Kali. car-*  
*bon. Kali bichr. Led. Lyc. M. austr.*  
*Merc. Mezer. Natr. Natrum mur.*  
*Nux vom. Phosphor. Puls. Rhodod.*  
*Rhus. Sabina. Sassap. Sep. Sil.*  
*Spong. Staphys. Sulph. Thuj. Ve-*  
*ratr. Vit. Zinc.*

GRASPING AT FLOCKS: *Arsen.*  
*Bell. Hell. Hyosc. Iod. Muriat. ac.*  
*Op. Phosph. ac. Rhus. Stram.*

HEATED, consequences of getting:

*Acon. Bell. Bry. Calc. Carbo. veg.*  
*Kali. Lyc. Nux vom. Puls. Sil.*

HEAVINESS OF THE BODY:  
*Chin. Lach. Kali. Natr. Natr. mur.*  
*Phosph. Sep. Stann.*

HUNGER, ill effects of: *Ant. crud.*  
*Ars. Bry. Calc. carb. Chin. Ipec.*  
*Puls. Sulph.*

HYDROPHOBIA: *Lobelia. Arsen.*  
*Bell. Canthar. Hyosc. Lach. Phos.*  
*Stram.*

HYPOCHONDRIA: *Asa foet. Aur.*  
*Bellad. Calc. Canth. Caust. Cham.*  
*Cina. Coccul. Con. Ferr. Graphit.*  
*Ignatia. Iodine. Lach. Lyc. Magn.*  
*mur. Merc. Mill. Mosch. Natrum.*  
*Natrum mur. Nux mosch. N. vom.*  
*Phosph. ac. Plat. Puls. Sabin. Sep.*  
*Staph. Sulph. Valer. Veratr.*

HYSTERIA: *Agn. Asa f. Aurum.*  
*Bell. Calcar. Caustic. Coccul. Con.*  
*Ignatia. Lach. Nux mosch. Phosph.*  
*Plat. Puls. Sep. Sil. Sulph. Valer.*  
*Viola od.*

INDURATIONS: *Arn. Ars. Aur.*  
*Bell. Calc. Camphor. Carbo an.*  
*Cham. Chin. Clem. Con. Dulc. Ferr.*  
*Graphit. Hep. Iodine. Lach. Lyc.*  
*Magn. mur. Phosph. Plumb. Puls.*  
*Sep. Sil. Sulph. Thuj.*

INFLAMMATIONS: *Acon. Antim.*  
*crud. Ant. tart. Arn. Arsenic. Bell.*  
*Bry. Calc. Cannab. Canth. Carbo*  
*veget. Cham. Con. Creos. Cupr.*  
*Dig. Dros. Dulc. Euphorb. Euphr.*  
*Hepar. Hyosc. Iod. Ipecac. Kali.*  
*Lach. Lyc. Magn. carb. Merc. Mur.*  
*ac. Nitr. Nitr. ac. Nux vom. Phos.*  
*Plumb. Puls. Rhus. Ruta. Sec. corn.*  
*Sep. Spong. Squill. Sulph. Sulph.*  
*ac. Veratr.*

NERVOUS EXCITEMENT: *Ambr.*  
*Bell. Calc. c. Cham. Chin. Coffea.*  
*Ferr. Iod. Laur. Merc. Nux vom.*  
*Phosph. Phosph. ac. Puls. Rhus.*  
*Sep. Sulph. Valer. Veratr.*

**NEURALGIA:** *Acon. Arnic. Arsen. Bellad. Bry. Calc. Capsic. Cham. Coccul. Coff. Colchic. Hep. Ignat. Kali. Merc. Mezer. Natr. Nux vom. Puls. Rhus. Spig. Staph. Sulph. Thuja. Valer. Veratr.*

**NODES, gouty:** *Antim crud. Arnica. Bryon. Calc. carbon. Calc. Phosph. Caust. Graph. Hepar. Led. Lycop. Mercur. Nux vom. Pulsat. Rhodod. Rhus. Staph. Sulph.*

**ONANISM, consequences of:** *Calc. Carbo veg. Carbo animal. China. Coccul. Con. Kali. Lach. Lycop. Merc. Natr. Natr. mur. Nux vom. Oleand. Phos. Phosph. ac. Pulsat. Rhus. Sil. Staph. Sulph. Thuja.*

**PAINS, wandering:** *Arn. Bell. Chin. Mang. N. mosch. Puls. Rhod. Rhus. Sabin. Sep. Sulphur.*

**PARALYSIS:** *Anac. Arn. Asar. Bar. Bell. Bry. Calc. Caps. Carbo veg. Caust. China. Cic. Coccr. Con. Croc. Croc. Dig. Dulc. Ferr. Fluor. acid. Hyosc. Ign. Kali. Lach. Laur. Lye. Magn. mur. Merc. Natr. Natr. mur. Nitric ac. Nux vom. Oleand. Op. Phosph. Plumb. Puls. Rhus. Sec. corn. Sil. Stamm. Stram. Sulph. Veratr. Zinc.*

**PHLEGMATIC TEMPERAMENTS:** *Bell. Caps. Chin. Iod. Lach. Merc. Natr. Natr. mur. Nitric ac. Puls. Sulph.*

**PLETHORA:** *Acon. Arn. Aur. Bell. Bry. Calc. Chin. Dig. Ferr. Graph. Hyosc. Kali. Lycop. Natr. mur. Nitric ac. Nux vom. Phosph. Puls. Rhus. Stram. Sulph.*

**POISONING WITH ALUM:** *Puls. Veratr.*

—with arsenic: *Carbo veget. China. Ferr. Hep. Ipec. Lach. Lye. Nux vom. Sulph. Veratr.*

—with lead: *Alum. Bell. Nux vom. Op. Plat.*

—with colchicum: *Coccul. Nux vom. Puls.*

—with iron: *Ars. Hep. Ipecac. Puls.*

—with adipic poison: *Arsenic. Phos. acid.*

—with fish-poison: *Bell. Camphor.*

—with honey: *Camph.*

—with iodine: *Arsen. Bellad. China. Phosph. Sulph.*

—with toad-poison: *Ars. (?)*

—with copper: *Bell. Hepar. Ipec. N. vom.*

—with opium: *Bell. Coff. Nux vom.*

—with phosphorus: *Coff. Nux vom. Sulph.*

—with mushroom: *Carbo veget. Coff. Puls.*

—with mercury: *Arn. Aur. Bell. Carbo veg. Cham. Chin. Dule. Hep. Iodine. Kali bichr. Lach.*

*Lyc. Nitr. ac. Mezer. Phos. ac. Sil. Staph. Sulph. Thuja.*

—with sal. ammoniac: *Coff. N. vom.*

—with sarsaparilla: *Bell. Merc. Sulph.*

—with acids: *Acon. Bry. Op. Puls.*

—with sulphur: *Arsen. Mercur. Puls. Sil.*

—with stramonium: *Coff. Hyoseyam. Nux vom.*

—with poison-vine: *Bell. Bry. Merc. Sulph.*

—with alcohol: *Coff. Nux vom.*

—with sausage-poison: *Arsen. Bell. Bry.*

—with tin: *Carbo veget. Hep. Puls.*

**PREGNANCY, ailments incident to:** *Aco. Bell. Bry. Calc. Chamom. Con. Hyosc. Lach. Lye. N. vom. Phos. Plat. Puls. Sep. Sulph. Veratr.*

**RAPHANIA:** *Arsen. Bell. China. Hyosc. Iod. Op. Rhus. Secale corn. Sol. nigr. Stram.*

**RHEUMATISM:** *Aco. Arn. Ars. Bell. Bry. Carb. veg. Caustic. Cham. China. Colch. Hep. Ignat. Kali*

- bichr.* Lach. Lye. Merc. Nitric ac. Nux vom. Pulsat. Rhodod. Rhus. Sassap. Sep. Spigel. Sulph. Thuj. Veratr.
- RIDING IN A CARRIAGE**, ailments from: *Ars.* Carbo veg. Coccul. Colch. Ferr. Ign. Natr. Petr. Psor. Sil. Sulph.
- RICKETS**: Asa f. Bell. Calc. c. Calc. phosph. Lye. Merc. Phosph. Pulsat. Rhus. Silic. Sulph.
- SALT**, ill effects of eating too much: Carbo veg. Merc. Nux vom.
- SANGUIN TEMPERAMENT**: Acon. Arn. Bry. Bell. Cham. Hyosciam. Ign. Nux vom. Rhus. Sulph. Sulph. ac. Veratrum. Zinc.
- SCURVY**: *Amm.* mur. *Ars.* Aur. Bor. Calc. Carbo an. Carbo veg. Creos. Hep. Iod. Mercur. Mur. ac. Natrum mur. Nitric ac. Nux vom. Silic. Staph. Sulph. Sulph. ac.
- SEA-SICKNESS**: *Ars.* Coccul. Creos. Ipecac. Petr. Rhus. Sulph. Veratr.
- SEDENTARY HABITS**, ill effects of: Aco. Carbo veg. Calc. Ignat. Natr. Natrum mur. N. vom. Puls. Sulph.
- SEMILATERAL AILMENTS**, left side: *Acon.* Alum. *Amm.* mur. Apis. Arn. Asa f. Asar. Bry. Calc. Cann. Chin. Cic. Colch. Coloc. Croc. Cupr. Daph. Dule. Ign. Iod. Lach. Lye. Mercur. Natr. Nitric ac. Nux mosch. Nux vom. Petr. Phos. Rhod. Selen. Sep. Spig. Sulphur. Sulphur. ac. Tar. Tart. emet. Thuj. Veratr. Viola od.
- right side: Agar. Alum. Bar. Bell. Bism. Brom. Bry. *Canth.* Carbo an. Caust. Cina. Con. Croc. Dig. Dros. Hepar. Ignat. Kali. Led. M. arct. Mosch. Oleand. Phosph. ac. Plumb. Rhus. Ruta. Sabad. Sabina. Sangu. Sil. Spongia. Staph. Stront. Sulph. ac. Tart. emet. Thuj. Vit.
- cross-wise: Agar. Mangan. Sil.
- SENSATION AS IF BLOWN UPON BY WIND**: Nux vom. Oleander. Rhus. Stram.
- as if congealing: Bellad. Cic. Cin. Dros. Hyosc. Led. Puls. Sec. corn. Stram.
- as if growing larger: Asa fæt. Bell. Ignat. Laur. Phosph. Puls. Rhus.
- as of a hair: Lycop. Natr. mur. Sulph.
- as of growing smaller: Calc. Croc.
- as of something alive: Croc. Ign. Lach. Mercur. Sec. corn. Sulph. Thuj.
- SPANISH FLIES**, ill effects of: Camph.
- SPASMS**, generally: *Acon.* Ang. Arn. *Ars.* Asa f. Bell. Bry. Calc. carb. Camph. Caust. Cham. Cic. Cina. Coccul. Coff. Con. Croc. Cupr. Hell. Hyosc. Ign. Ipec. Lach. Laur. Lycop. Merc. Mosch. Nux mosch. Nux vom. Op. Plat. Plumb. Puls. Rhus. Ruta. Sec. corn. Stann. Stram. Sulph. Tart. emet. Veratr. Zinc.
- in the evening: Caust. Cina. Laur. Nux vom. Puls. Stann. Stram.
- with anxiety: *Ars.* Bell. Calc. Cham. Cin. Cupr. Hyosc. Ign. Lach. Puls. Veratr.
- with dyspnœa: Ang. Bell. Camph. Cupr. Ign. Ipec. Nux vom. Op. Puls.
- with staring eyes: Bell. Hyosciam. Nux vom. Op. Sec. corn. Stram.
- with contortion of the eyes: *Acon.* Bell. Coccul. Cuprum. Hyosc. Ign. Lach.
- with upwards: Bell. Ignat. Lach.
- with downwards: Cic. Lach.
- with sidewise: Bell. Caust. Hyosc. Lach.
- glazed eyes: Coccul.
- half open eyes: Caust. Cina. Ipec.
- with eyes protruded: Hyosc.



- with eyes closed: **Bell. Cham. Coccul. Croc. Hyosc. Merc. Natr. mur. Op.**
- after repelled eruptions: *Calc. Caust. Lach. Nux vom. Sulph.*
- with bloated bowels: *Calc. Cham. Cin. Merc.*
- with violent movements: *Calc. Cin. Cupr. Hell. Hyosc. Op. Stram.*
- from contact: **Bell. Coccul. Stram.**
- with loss of sense: **Bell. Camph. Cic. Cina. Cupr. Hyosc. Ign. Ipec. Lach. Nux vom. Op. Sil. Stann. Stram.**
- with nausea: *Ipec. Nux vom. Puls. Tart. emet. Veratr.*
- with clenched thumb: *Bell. Hyosc. Ign. Lach. Merc.*
- with delirium: **Bell. Croc. Hyosc. Op.**
- with diarrhoea: *Chin. Hyosc.*
- with thirst: *Cham. Nux vom.*
- with eclampsia: **Bell. Caust. Cham. Cic. Cin. Ignat. Hyosc. Laur. Nux mosch. Nux vom. Op. Phosph. Sec. corn.**
- epileptic: *Agar. Ars. Bell. Calc. c. Camph. Caustic. Cham. Cic. Cina. Coccul. Cupr. Glon. Hepar. Hyosc. Ign. Lach. Merc. Nitr. ac. N. vom. Op. Plumb. Puls. Rhus. Sec. corn. Sil. Stann. Stram. Sulph. Verat.*
- with vomiting: *Cupr. Ipecac. Nux vom. Puls. Sec. corn.*
- with danger of suffocation: *Cupr. Ign. Nux vom. Op.*
- with yawning: *Ign. Veratr.*
- after emotions: *Ballad. Coff. Hyosc. yam. Ign. Nux vom.*
- with pale face: *Ipec. Natrum. Sil. Stann.*
- with blue face: *Camphor. Cupr. Cin. Op. Veratr.*
- yellow face: *Cic. Nux vom.*
- red face: **Bell. Ign. Stram.**
- with cold sweat in the face: **Cocc.**
- with distorted features: *Belladonna. Cham. Coccul. Ipecac. Stram. Veratr.*
- with involuntary emission of urine: *Caust. Coccul. Hyosc.*
- with palpitation of the heart: *Lach. Sec. corn. Spig.*
- with heat: **Bell. Cham. Nux vom.**
- with sensation of hunger: *Hyosc.*
- hysteric: *Aur. Belladonna. Caustic. Cham. Coccul. Coff. Cupr. Ignatia. Ipec. Mosch. Nux vom. Plat. Puls. Stram. Veratr.*
- internal: *Calc. carb. Caust. Cocc. Coloc. Graph. Ipecac. Magn. mur. Stann.*
- with delirium: **Bell. Cin.**
- with coldness of the body: *Cin. Hyosc. Puls. Veratr.*
- with coldness of the limbs: *Caust. Hyosc. Op. Veratr.*
- cataleptic: *Agar. Bell. Cham. Cic. Hyosc. Ipec. Stram. Veratr.*
- with locked jaw: *Bell. Hyosc. yam. Lach. Nux vom. Opium. Plat. Veratr.*
- of children: **Bellad. Calcar. Cham. Cina. Coffea. Ipec. Nux vom. Op. Sulph.**
- clonic: *Agr. Ambr. Arnica. Arsen. Bar. Bellad. Calc. Camph. Canthar. Caust. Cham. Cic. Cina. Coccul. Con. Cupr. Hell. Hyosc. Ign. Ipec. Laches. Kali. Magn. Merc. N. vom. Op. Phosph. Rhus. Sec. corn. Sepia. Stann. Stram. Sulph. Veratr.*
- with movements of the head: *Bell. Cham. Cic. Hell. Lach. Op. Stram.*
- opisthotonic: **Ign.**
- preceded by head-ache: *Bell. Hyosc. yam. Lach. Nux vom.*
- succeeded by head-ache: *Bellad. Cina.*
- with contraction of the limbs: *Hyosc. yam.*
- with laughter: *Bellad. Calc. Caust. Ign. Lach.*

- with creeping as of a mouse: Bell. Sulph.
- with colic: Caustic. *Cham. Cin. Cupr. Merc. Sulph.*
- SWEAT, anxious: Arn. Ars. Calc. Cham. Ferr. Ign. Merc. Natr. Nux vom. Phos. Puls. Rhus. Sep. Spong. Stramon. Sulph. Veratr.
- bloody: Lach. Lye. Nux vom.
- musty smell: N. vom. Puls. Rhus.
- exhausting: Ambra. Arsen. Bryon. Calc. Carbo an. Chin. Digit. Ferr. Hep. Iod. Lye. Mercur. Natr. mur. Nitric acid. Nux vom. Phosphor. Samb. Sep. Stann. Sulph. Veratr.
- fatty: Bryon. China. Merc. Selen.
- staining the linen: Ars. Graphit. Merc. Selen.
- yellow: Graph. Lach. Merc.
- semilateral: Cham. Chin. Nux vom. Puls.
- smelling like juniper: Sep.
- cold: Acon. Amm. mur. Ant. tart. Arn. Ars. Bryon. Calcar. Camph. Cannab. Carbo veg. China. Cin. Coccul. Cupr. Dulc. Hell. Hep. Ign. Ipec. Lach. Lye. M. arct. Mercur. Nux vom. Puls. Rheum. Rhus. Sabad. Sec. corn. Sep. Staph. Sulph. Veratr.
- smelling like old cheese: Plumbum.
- viscous: Acon. Ant. tart. Ars. Bry. Cham. Daph. Ferr. Hep. Iod. Lye. Merc. Phosph. Phosph. ac. Plumb. Sec. corn. Veratr.
- red: Arn. Calc. Dulc. Lycop. Nux vom.
- sour smelling: Arn. Asar. Bellad. Cham. Ferr. Hep. Ignat. Iod. Ipec. Kali. Lye. Merc. Nitric ac. Rhus. Sep. Sil. Sulph. Veratr.
- stinging: Cham. Con.
- fetid: Ammon. mur. Baryt. Canth. Con. Dulc. Ferr. Fluor. ac. Graph. Hep. Kali. Led. Lye. Merc. Nitric. ac. Nux vom. Phosph. Puls. Rhus. Selen. Sep. Staph. Veratr.
- having an urinous smell: Canthar. Nitric ac.
- smelling like onion: Bov. Lycop.
- in the morning: Op. Nux vom. Plat.
- with open mouth: Mosch. Op.
- with distorted mouth: Bellad. Nux vom. Op. Stram.
- followed by weariness: Bell.
- at night: Bell. Calc. carbon. Calc. caust. Cham. Cin. Ign. Merc. Op. Sulph.
- during new-moon: Calc. Caustic. Cupr. Sil.
- falling down unconscious: Bell. Cupr.
- after onanism: Calc. China. Coccul. Lach. Lye. N. vom. Op. Staph. Sulph. Veratr.
- with dilated pupils: Bellad. Calc. Cic. Cin.
- during the menses: Coccul. Cupr. Ignat. Nux vom. Plat. Puls.
- with rattling breathing: Ipec. Lach. Nux vom.
- in the back: Bell. Ign. Ipec. Op. Rhus.
- falling backwards: Bell.
- with froth at the mouth: Chamom. Cupr. Hyosc. Ign. Lach. Nux vom.
- with froth at the mouth, bloody: Lach. Op. Pyrocarb.
- during sleep: Bellad. Calcar. caust. Cin. Sil.
- followed by drowsiness: Bell. Dros. Ign. Lach. Op.
- after a fright: Bellad. Coffea. Ignat. Lach. Op. Nux vom. Veratr.
- with a scream: Cina. Crot. Hyosc. Lach. Nux vom. Op. Sulph.
- followed by weakness: Bell. Calc. Cic. Sec. corn. Veratr.
- with sticky sweat on the head: Camph.
- tetanic: Aconit. Ars. Bell. Camph. Cic. Cupr. Ign. Ipec. Laur. Op.

- Plat. Rhus. *Secale corn.* *Stram.* Veratr.
- Saint Vitus' dance, chorea: **Bell.** **Caust.** *Coccul.* *Croc.* *Cupr.* *Hyosc.* *Ign.* *Lach.* *Laur.* *Nux vom.* *Stram.* *Zinc.*
- after an injury: *Arn.* *Pulsat.* *Rhus.* *Sulph.*
- alternately red and pale: *Igp.*
- with crying: *Bell.* *Caust.* *Cuprum.* *Ign.* *Lach.* *Puls.*
- of lying-in females: *Bell.* *Chamom.* *Coff.* *Hyosc.* *Ign.* *Puls.*
- caused by worms: *Calc.* **Cin.** *Hyosc.* *Merc.* *N. vom.* *Sulph.*
- dentition: *Bell.* *Calc.* *Coff.* **Cham.** *Ign.* *Merc.* *Sulph.*
- with gritting of the teeth: *Cin.* *Coff.* *Hyosc.*
- with trembling: *Cupr.* *Lach.*
- with twitching: *Bell.* *Calc.* **Caust.** *Cham.* *Cina.* *Cuprum.* *Hyosc.* *Ign.* *Ipecac.* *Lach.* *Merc.* *Op.* *Plumb.* *Rhus.* *Sec. corn.* *Stram.* *Sulphur.* *Veratrum.*
- SPIRITS OF CAMPHOR, ill effects of: *Coff.* **Op.**
- STRAINING BY LIFTING, ill effects of: *Arn.* **Bryon.** *Calc.* *Coccul.* *Con.* *Graph.* *Lye.* *Natr.* *Nitric ac.* *Nux vom.* *Phosph.* *Phos. ac.* **Rhus.** *Ruta.* *Sil.* *Sulph.* *Sulph. ac.*
- SWEAT, ill effects of suppression of sweat: *Acon.* *Bell.* *Bry.* **Cham.** *Chin.* *Duleam.* *Lach.* *Nux vom.* *Pulsat.* *Sil.* *Sulph.*
- TEA, ill effects of: *China.* *Ferrum.* *Lach.*
- THIRST: *Acon.* *Ars.* **Bellad.** *Bryon.* *Canth.* *Cham.* *Ipecac.* *Merc.* *Nux vom.* *Puls.* *Rhus.* *Sulph.* *Veratr.*
- TOBACCO, ill effects of: *Cham.* *Coccul.* *Nux vom.*

UNEASINESS, bodily: *Aconitum.* *Anac.* *Ars.* *Asar.* **Bellad.** *Bry.* *Calc.* *Cann.* *Carbo veg.* *Cham.* *Chin.* *Coffea.* *Croc.* *Cupr.* *Ferr.* *Graph.* *Hyoscyam.* *Igu.* *Iod.* *Kali.* *Lycop.* *M.* *anstr.* *Mere.* *Mur. ac.* *Natr.* *N. vom.* **Op.** *Phos.* *Plat.* **Rhus.** *Samb.* *Sep.* *Sil.* *Staph.* **Stram.** *Sulph.* *Veratr.*

VASCULAR ERETHISM: *Aconit.* *Ambra.* *Arn.* *Aurum.* **Bellad.** *Bor.* *Bry.* *Calc.* *c.* *Carbo veget.* *Caustic.* *China.* *Con.* *Creos.* *Ferr.* *Hep.* *Iod.* *Kali.* *Lycop.* *Natrum mur.* *N. vom.* *Op.* *Petr.* **Phosph.** *Rhus.* *Sassap.* *Sepiæ.* *Sil.* *Stann.* *Sulph.*

WALK, difficulty of learning to walk: **Calcar.** *Mercur.* *Sil.* *Sulph.*

WEAKNESS, general: *Agar.* *Amm.* *Anac.* *Arn.* *Ars.* *Bell.* *Brom.* *Calc.* *Carb. an.* *Carbo veg.* *China.* *Cocc.* *Conium.* *Ferr.* *Fluor. ac.* *Graphit.* *Ipecac.* *Kali.* *Lach.* *Lycop.* *Magn.* *mur.* *Merc.* *Natr.* *Natr. mur.* *Nitric ac.* *Nux vom.* *Oleand.* *Op.* *Phosph.* **Phosph. ac.** *Plat.* **Puls.** *Rhus.* **Sec. corn.** *Sepiæ.* *Sil.* *Staph.* *Sulphur.* *Veratr.*

WEANING, ailments from: *Bellad.* *Bry.* *Calc.* **Puls.**

WEARINESS: *Arn.* *Ars.* *Bell.* *Calc.* *Cann.* *Caust.* *Chin.* *Coccul.* *Coffea.* *Con.* *Croc.* *Ferr.* *Graph.* *Hep.* *Ign.* *Ipec.* *Kali.* **Lycop.** *Merc.* *Natr.* *Nux vom.* *Oleand.* *Phosph.* *Plat.* **Puls.** *Rhod.* *Rhus.* *Spong.* *Sulph.* **Tart. em.** *Thuja.* *Veratr.*

—consequences of: *Arn.* *Bry.* (*off.*) *Rhus.* *Puls.*

WHITE, red parts turning: *Arsen.* *Bor.* *Calc.* *Ferr.* *Hell.* *Mercur.* *Nitric ac.* *Nux vom.* *Phos.* *Secale corn.* *Staph.* *Sulph.* *Sulph. ac.*

WOUNDS: *Arn.* *Calendul.* *Hyper.* **BURNS:** *Arnica.* *Urtica.*

PAIN FROM BURNS: *Ars.* *Caust.*

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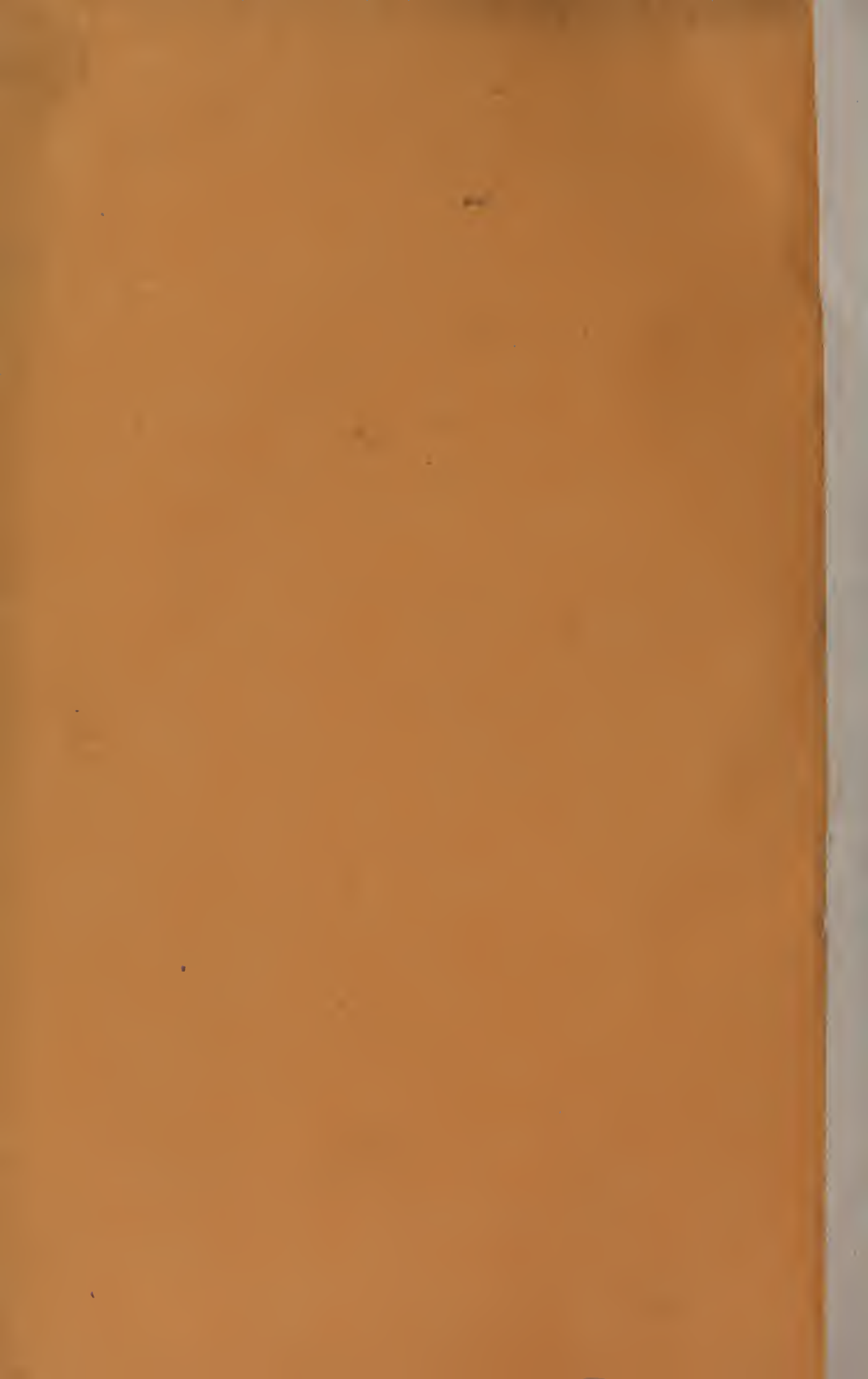
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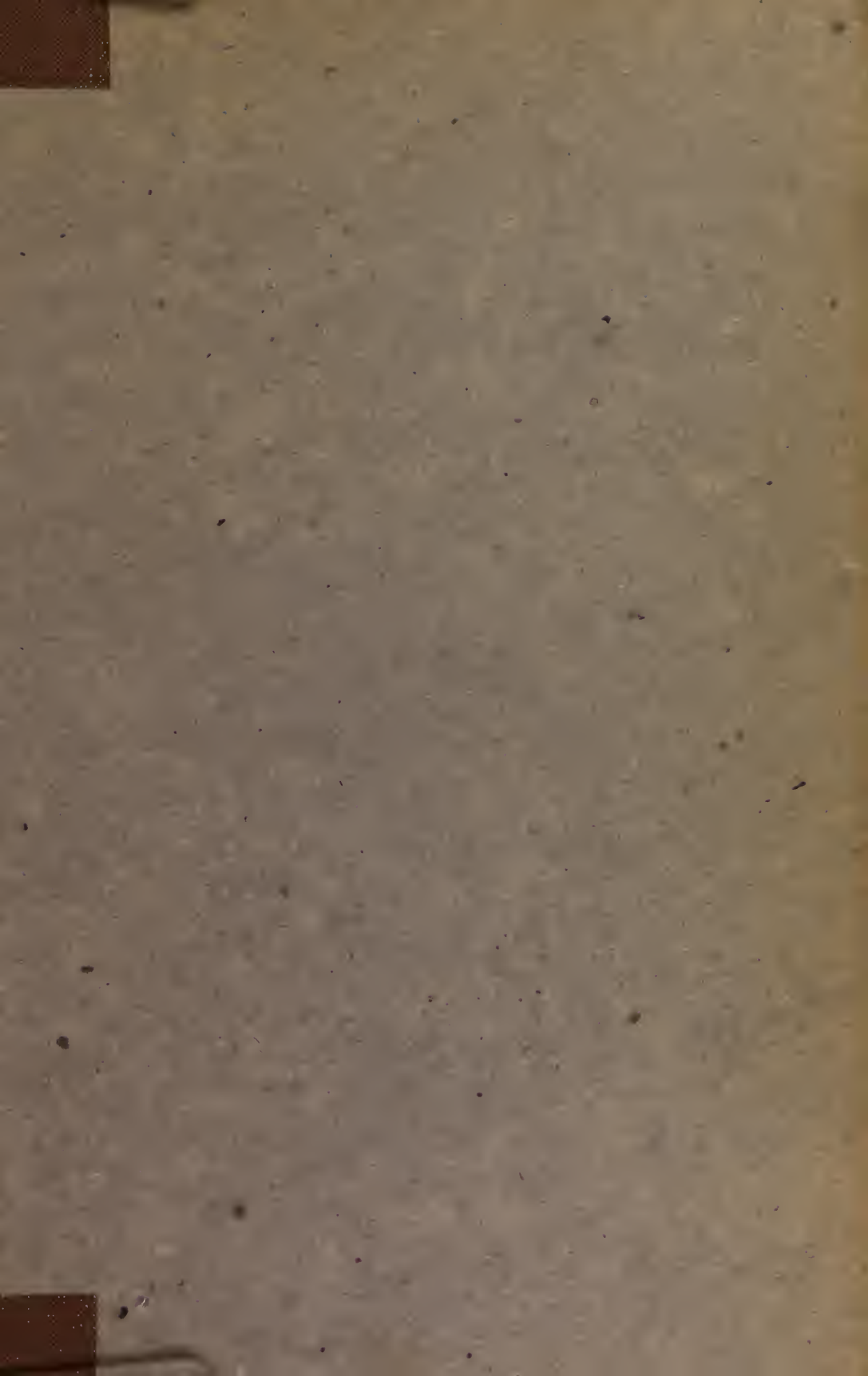
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